

Coronavirus COVID-19

BC Centre for Disease Control | BC Ministry of Health



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

Provincial COVID-19 Response

JULY 30, 2020



Ministry of Health



BC Centre for Disease Control

If you have fever, a new cough, or are having difficulty breathing, call 8-1-1.



Table of Contents

Strategic Context.....	3
Goal and Objectives	3
Scope and Planning Assumptions	4
Principles for Practice Education Planning & Coordination.....	4
Decision Making Process: Significant Delays/ Suspensions.....	6
Impacts to Existing Practice Education Guidelines (PEGs).....	6
Provincial Health Officer Facility Staff Assignment Order: Student Practice Education Implications.....	8
Additional Requirements: Student Practice Placements.....	9
Resources and Supports.....	10
Transition to Practice during the COVID-19 Pandemic.....	10
Appendix 1: Summary of Roles and Responsibilities	11
Appendix 2: Post-Secondary Institution Health Program Delay Process.....	12
Appendix 3: Summary for Preceptors/ Clinicians Supervising Students during COVID-19	13
Guideline Contributors and Reviewers	14
References	15

Strategic Context

The Planning Board for Health and Medical Education (PBHME), representing the Ministry of Advanced Education, Skills and Training (AEST) and Ministry of Health (MoH) recognizes the impact of the COVID-19 pandemic on the education and health-care sectors. While the rationale for disruption to routine processes and practices is clear, both ministries would like to emphasize the continued importance of practice education/ clinical placements in supporting the health system and student learning.

It is critical that British Columbia avoids further unintended consequences and that practice education continues in a proactive planned way to ensure the future of the province's health system workforce. With B.C.'s [Restart Plan](#) being implemented across sectors, the ministries support an approach to practice education that continues to prioritize the safety of all involved in the delivery of these programs, including students, employees (staff/ faculty), patients and families.

This unprecedented time calls for creative, innovative, and flexible approaches to help students demonstrate competencies and achieve learning outcomes. There is a need for enhanced coordination among the practice (health care organizations (HCOs)) and education (post-secondary institutions – (PSIs)) sectors to serve British Columbians now and in the future. PBHME is committed to shared decision making and regular updates to both sectors.

HCOs / PSIs continue to ensure that they meet all public health requirements, COVID-19 [clinical care guidelines](#) and infection prevention and control (IPC) pandemic guidelines. The protection of all involved in the delivery of practice education will continue to be at the forefront in B.C.'s response to COVID-19 and is in keeping with the ethical guidelines established for the management of the pandemic.

These guidelines are intended to complement, not replace any orders, notices, or guidance issued by the Provincial Health Officer (PHO). PSIs should also reference the COVID-19 Go Forward Guidelines for safe operation for public PSIs, as well as the individual institution's COVID-19 Safety Plan that outlines the policies, guidelines, and procedures they have put in place to reduce the risk of COVID-19 transmission. Note: The terms clinical placements and practice education are used interchangeably throughout the document. [Appendix 1](#) provides a snapshot of practice education system roles and responsibilities.

Goal and Objectives

Goal

Provide guidance to the HCO and PSI sectors to promote practice education/ clinical placement continuity for all health-care disciplines in B.C. during the COVID-19 pandemic. The desired outcome of practice education activities is to support the development of a competent, skilled health workforce for B.C. leading to improved health outcomes in the population.

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 Note: This document is intended to guide practice at every HCO where practice education occurs, and all PSIs that deliver health programming with a required practice education component.

¹ Practice Education (PE) Definition, former provincial PE Committee, B.C. Academic Health Council, 2011.

Objectives

- Create an integrated flexible approach to support HCOs and PSIs in delivering practice education. This approach is adaptable in response to evolving pandemic phases, changes in COVID-19 transmission in the placement setting, PHO Orders, Ministry of Health’s policy and relevant HCO and PSI policies/guidelines.
- Develop a prioritization approach to promote practice education continuity.
- Ensure students are prepared and supported to practice safely according to the most up-to-date BC Centre for Disease Control (BCCDC) and the Ministry of Health’s COVID-19 [clinical care guidelines](#), policy, IPC policy/guidelines and [COVID-19: Emergency Prioritization in a Pandemic Personal Protective Equipment \(PPE\) Allocation Framework](#).
- Ensure HCOs and PSIs uphold the existing provincial Practice Education Guidelines, and all legislated and regulatory standards currently applicable to practice education, e.g. WorkSafeBC.

Scope and Planning Assumptions

Scope

This document is intended to provide guidance for HCOs and PSIs to collaboratively plan and manage student practice education for all health care disciplines in B.C. This guideline will remain in effect for the duration of the COVID-19 response. This guideline will be updated, as needed.

This guidance document provides the framework for practice education promoting:

- Quality and safety of the practice education experience.
- Evidence-based practice, e.g. BCCDC clinical guidelines.
- Alignment with current regulations, standards and legislation.
- Ongoing clarification of roles and responsibilities for all practice education partnerships.
- Common, inclusive language understood by a broad range of disciplines (regulated/ unregulated).
- Clarity, consistency and equity for planning and practice education placement processes.

Planning Assumptions

- COVID-19 is an established human pathogen and likely to circulate in the population for several years.
- Although intense vaccine development efforts continue, if and when a COVID-19 vaccine will be widely available is not known.
- There will likely be periods of increased COVID-19 transmission. These periods are likely to affect different communities in B.C. at different times.

Principles for Practice Education Planning & Coordination

Safety

1. HCOs and PSIs prioritize safety, training and support for staff, faculty and students to protect them against the spread of COVID-19 including:
 - Implementing IPC measures (public health measures, environmental/ administrative measures, personal measures and PPE)² helps create a safe placement environment for all.
 - Following PHO Orders and the Ministry of Health’s policies specific to COVID-19.

² http://www.bccdc.ca/Health-Professionals-Site/Documents/COVID19_IPCGuidanceCommunityBasedHCPsClinicSettings.pdf June 11, 2020.

- Ensuring faculty and students conduct a daily [Self-Assessment](#) before each practice education shift.
- Emphasizing to employees, faculty and students that they need stay home when they are sick.
- Providing pandemic education and resources to support care (e.g. clinical care/ IPC guidelines).

Responsibility

1. PSIs' health programs have a social mandate to prepare the health-care workforce and ensure a continuous supply of competent graduates. This mandate is more critical and immediate during a global health challenge posed by the pandemic.
2. 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.
3. 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

1. Collaboration between AEST, MoH, PSIs, HCOs and regulatory bodies is needed. It should be facilitated, centrally supported and coordinated on a provincial basis.
2. 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

1. 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 associated with the pandemic response may present opportunities to develop essential competencies.

Prioritization

1. Students in health programs that lead to employment in a MoH-priority profession³ or have competencies critical to the pandemic response/ recovery (e.g. surgical renewal, intensive care, long- term care, primary and community care) may be given preferential access to placements to ensure graduation and entry into the workforce.
2. 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.
3. Graduate or second-credential program students who are registered professionals' practice education should only be cancelled under rare and exceptional circumstances.

Integrated Preparedness Planning

1. Education and health services may experience changes and fluctuations during periods of increased COVID-19 transmission in the community. Both sectors will need to develop integrated preparedness plans and monitoring systems that align with emerging health needs and evolving practice educations requirements.
2. 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.

³ https://www.health.gov.bc.ca/library/publications/year/2015_a/health-human-resources-policy-paper.pdf June 4, 2020.

Decision-Making Process: Significant Delays/ Suspensions

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

Both PSIs and HCOs have a responsibility to ensure the safety of their people. 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 Medical Health Officer 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.
- 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 (see [Appendix 2: PSI Health Program Delay Process](#)). To ensure that the decision is informed by an appropriate assessment of risk, consultation with the local Medical Health Officer is highly recommended.

HCOs: HCOs considering cancelling or significantly reducing placements should work with their senior leaders, MoH, 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 Medical Health Officer is highly recommended.

Impacts to Existing Practice Education Guidelines

All PSIs and HCOs in B.C. are guided by the Practice Education Guidelines (PEG)s. These PEGs support the safety of patients, staff, students and faculty. It is intended that the PEGs will continue to be followed (for the complete list of PEGs: <https://hspscanada.net/features/>). With the declaration of the COVID-19 pandemic and public health measures in place, there are some interim changes to how requirements may be met for some PEGs.

Pre-placement requirements that may be affected by COVID-19

Immunization

Tuberculosis (TB) Testing: On April 24, 2020, BCCDC Provincial TB Services communicated that student TB testing was deemed a non-essential service during the pandemic. BCCDC noted the final decision to defer or continue TB testing at the local level is under the jurisdiction of the regional MHO. PSIs are to

contact their local public health office regarding the availability of TB testing. The requirement for TB testing must be met, if the local TB testing services are available. If the service is not available, PSIs are to contact their local HCO to discuss any potential implications.

Respiratory Protection

The student PEG for health-care settings during the COVID-19 pandemic will align with the most up to date COVID-19 Pandemic: B.C.'s Personal Protective Equipment (PPE) Framework which provides direction to the health system on the use of PPE during the COVID-19 pandemic. The most up-to-date PPE framework is available online at: <http://www.bccdc.ca/health-professionals/clinical-resources/covid-19-care/infection-control/personal-protective-equipment>

As more knowledge, data, and evidence become available, i.e. where COVID-19 transmission and the epidemiology are known, tailored guidance can be provided for the use of PPE. Should B.C.'s knowledge of the COVID-19 virus or the incidence or prevalence of the disease change significantly and the risk of community transmission increase, the PPE Framework will be amended as appropriate and necessary.

PPE Guidance: Students/ faculty will usually follow the same PPE protocol as the health-care worker/ preceptor they are working with. In instances where a student/ faculty is concerned about transmission of COVID-19 virus or is immunocompromised, the student/ faculty may elect to wear a surgical or procedure mask.

PPE Supply: HCOs supply students and on-site PSI educators with respiratory protection required for care of patients during their placement.

N95 Fit Testing: It is anticipated that not all students will require fit testing for an N95 respirator. An N95 respirator and eye protection (i.e., goggles or face shield), gloves and gown are required for procedures that are aerosol generating for patients with suspected or confirmed COVID-19 or airborne diseases. Where PSIs are temporarily unable to undertake N95 fit testing, HCOs are encouraged to support N95 fit testing for those students who require it where possible.

Orientation (On-site Faculty and Students)

Cardiopulmonary Resuscitation (CPR) Certification: Placements can proceed regardless of a student's CPR renewal status. PSIs/ HCOs will work with students who need to obtain/ renew their certification to ensure they work to their current skill level. PSIs will ensure students proceed with obtaining certification as soon as CPR training resumes.

Provincial Violence Prevention Classroom (PVPC) Training: High-risk areas that require PVPC training, along with their contact information, are noted in the destination profile in Health Services Placement Network (HSPnet). Classroom training may be available with physical distancing measures in place. Connect with the destination contact in the high-risk areas to confirm training availability. All online PVP modules are an ongoing requirement.

Preceptor Resources: Preceptors or clinicians who supervise students should review and provide relevant site or program guidelines with the student and on-site faculty (see [Appendix 3 - Summary for Preceptors/ Clinicians Supervising Students during COVID-19](#)).

PHO Facility Staff Assignment Order: Student Practice Education Implications

Facility Staff Assignment Order – Single Site	
<p>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, assisted living 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.</p>	
<p>Excluded Sites: This 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 to make exemption.</p> <p>Order Exemption – item G: This order does not apply to 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. Note: Students/ on-site faculty in the above exempted disciplines will also be exempted from the order.</p>	
<p>Practice Education Interpretation of the PHO Order:</p> <ul style="list-style-type: none"> • 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 and/or employment roles in a facility named in the order and vice versa. • Students/ on-site faculty are NOT permitted to hold more than one role within sites under the PHO Order. 	
<p>Implications for PSIs and HCOs: PSIs and HCOs listed in the Order will follow the Order for the duration it is in place. Together, the two sectors will identify and inform all affected students and faculty.</p>	
<p>For students/ on-site faculty included in the PHO Order HCOs shall:</p> <ul style="list-style-type: none"> • NOT permit students currently in a placement within a site named in the order to hold any role at another site named in the order. • Not 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. 	<p>For students/ on-site faculty included in the PHO Order PSIs shall:</p> <ul style="list-style-type: none"> • NOT make arrangements for students to be placed in more than one facility named in the Order. • NOT arrange for on-site faculty to attend at more than one facility named in the order to supervise students. • Ensure students and on-site faculty are aware of all aspects of the order.
<p>14-day self Isolation: There is NO requirement for students and on-site faculty to complete a 14-day 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 have come from a facility that has experienced an outbreak.</p>	
<p>Other: Regional MHOs may require that new and returning students/ faculty who have been absent from the facility for more than 14 days complete a COVID-19 screening questionnaire.</p>	

Additional Requirements: Student Practice Placements

Local Policy/ Guidelines: PSIs and HCOs should share any site/ program specific guidance related to the COVID-19 response prior to the start of the student practice education placement.

Screening: PSIs should ensure students/ faculty are aware of current self-assessment requirements, and onsite pre-screening requirements of any single site facilities implicated in the PHO's order.

- Students/ faculty should complete a self-assessment using the provincial [self-assessment tool](#) prior to each practice education shift to ensure they are asymptomatic.
- Additionally, local sites may have additional requirements for self assessment. PSIs and HCOs will need to determine the screening that applies to both students and faculty members.

Illness Occurring During a Practice Education Shift: If students or faculty should become symptomatic with COVID-19, cold or influenza symptoms while on-site, they must leave the practice setting immediately and promptly seek COVID-19 testing and care. Students with cold, influenza or COVID-19-like symptoms are advised to seek COVID-19 testing and care. Should the student or faculty test positive for COVID-19, public health will direct appropriate contact notification including notification of patients, health-care workers, other students and faculty.

B.C. has expanded testing criteria to find new cases and prevent the spread of COVID-19 in the community. Testing is recommended for anyone with cold, influenza or COVID-19-like symptoms, however mild.⁴

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. They must wash placement clothes daily between shifts.

Physical Distancing: Where possible during practice education, education or work experience, students and faculty should follow physical distancing recommendations i.e. maintaining a distance of two metres between people. This includes adhering to distancing guidelines while on shift break, before and after a shift to decrease transmission risk. Students and on-site faculty are advised to wear appropriate PPE as per the PPE Framework.

Note: For settings and situations where maintaining a physical distance of two metres is not practical, assigning students to smaller groups helps to reduce the risk.

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.

PPE: The PPE Framework guides the use of PPE in health-care settings. It is expected that PPE will be provided by the practice education placement setting. PSIs/students will not normally be asked to provide PPE for use in practice education settings. However, where PPE access may be an obstacle to a placement being offered, PSIs are encouraged to work with HCOs partners to ensure students have access to the PPE they need to continue the placement.

⁴ <http://www.bccdc.ca/health-professionals/clinical-resources/covid-19-care/covid-19-testing/viral-testing-july-8>, 2020.

If HCOs have concerns about student access to PPE that could impact placement continuity, HCOs should refer back to the process described above in the “Requirements for PSIs/ HCOs Prior to Implementing Longer Term Delays/ Suspensions of Student Practice Education “ section on page 7.

Resources and Supports

Provincial Resources: Infection, Prevention and Control

- BCCDC provides current, provincial guidelines and resources for IPC practices: <http://www.bccdc.ca/health-professionals/clinical-resources/covid-19-care/infection-control>.
- HCOs must follow IPC measures for COVID-19, as articulated in the [Ministry of Health Policy Communique May 19, 2020](#). Orders from the PHO or a MHO take precedent over this policy.
- The PPE Framework guides the use of PPE in health-care settings. <http://www.bccdc.ca/health-professionals/clinical-resources/covid-19-care/infection-control/personal-protective-equipment>
- Routine Practices and Additional Precautions for Preventing the Transmission of Infection in Healthcare Settings: <https://www.canada.ca/en/public-health/services/publications/diseases-conditions/routine-practices-precautions-healthcare-associated-infections.html>

PSIs/ HCOs Resources

- PSIs have resources in place to support students during the pandemic. To learn more, visit the websites for each PSI provided below.
- HCOs provide students with appropriate secure access to information and tools required for telehealth or other remote health care delivery.
- 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:

COVID Resources by Health Authority (HA)/ HCO	Student Education Resources by HA/ HCO
First Nations Health Authority	First Nations Health Authority
Fraser Health	Fraser Health
Interior Health	Interior Health
Island Health	Island Health
Northern Health	Northern Health
Providence Health Care	Providence Health Care
Provincial Health Services Authority	Provincial Health Services Authority
Vancouver Coastal Health	Vancouver Coastal Health

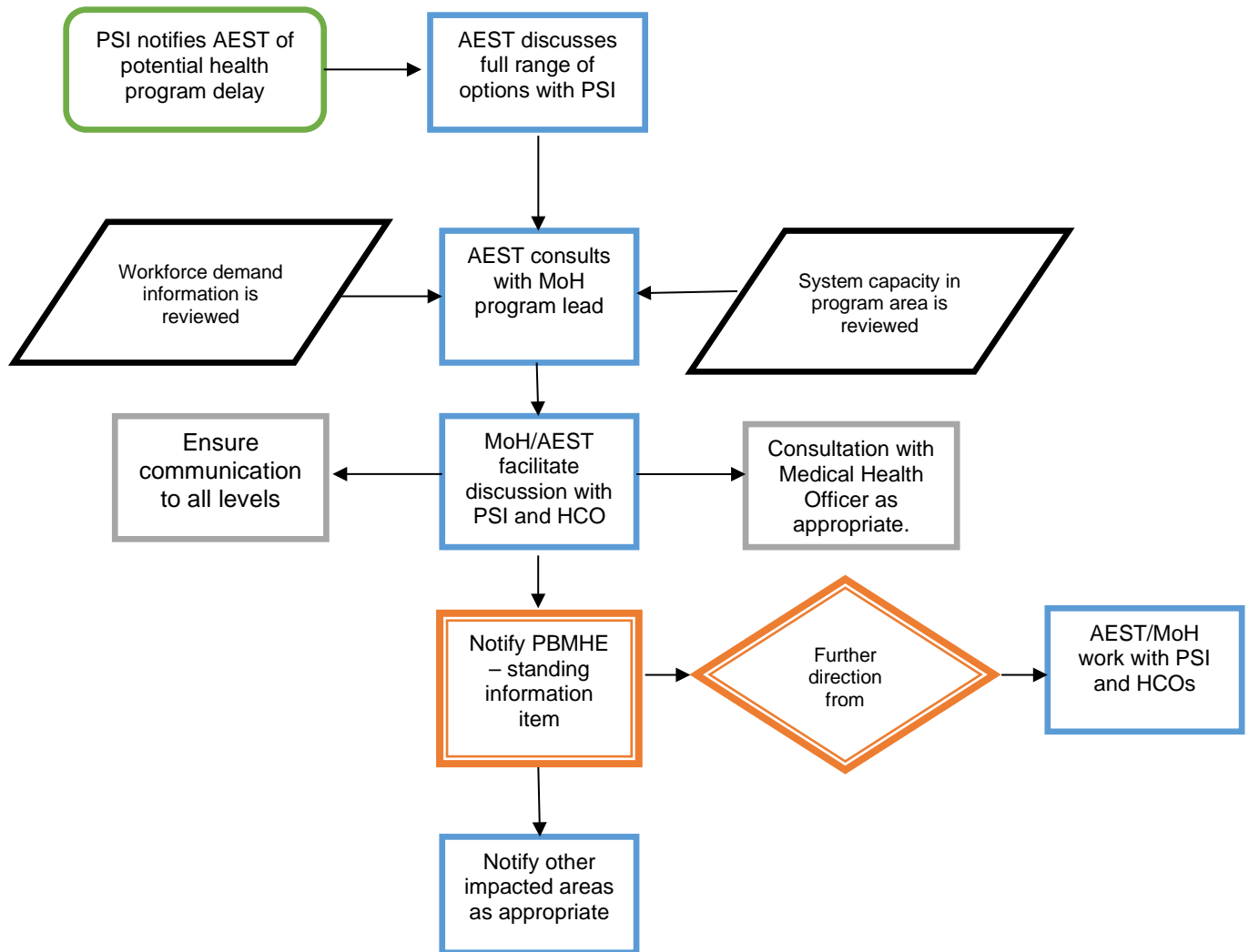
Transition to Practice during the COVID-19 Pandemic

Students graduating from health programs during the pandemic may have different practice education experiences compared to the past. It is important that both sectors recognize that new approaches may be required to support a successful transition to practice.

Appendix 1: Summary of Roles and Responsibilities

Topic	PSI Action	HCO Action	Provincial/ Government Supports
Coordination and Planning for Practice Education Placements	Enhanced collaborative planning to reduce the impact of increased COVID-19 transmission on practice education requirements.	Enhanced collaborative planning to reduce the impact of increased COVID-19 transmission on practice education requirements.	MoH/AEST: policy and communication to sectors. PHSA HSPnet: monitor aggregate student activity data. Guidance/updates based on any 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, MoH, and the local medical health officer.	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, MoH, and the local medical health officer.	MoH/AEST: Provide policy direction or guidance to the sectors on practice education placement continuity. PHO: public health orders to restrict placements or permit placements with appropriate precautions/measures.
Pre-practice education placement requirements	Ensure student records are current for CRC, immunization, and orientation. Ensure students and faculty are aware of and will implement specific PEG 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.	
Infection, Prevention and Control Practices	Educate students on personal safety measures, including the use of PPE, respiratory hygiene, frequent hand hygiene, and physical distancing. Routine practices and additional precautions.	Provide learning resources, policies and protocols and job aids to support IPC practices in clinical settings.	BCCDC: COVID-19 guidelines.
PPE	Fit testing of N95 respirators. Provide appropriate PPE to students for labs. Don/doff procedures. Modify practice education placement areas and patient assignments as required.	Provide appropriate PPE to students and faculty for practice education placements. Follow IPC practices for COVID-19. Modify practice education placement areas and patient assignments as required.	BCCDC: Clinical care setting guidelines. PPE framework. IPC measures guidelines and policies.

Appendix 2: PSI Health Program Delay Process



Appendix 3: Summary for Preceptors/ Clinicians Supervising Students during COVID-19

Timing	Clinicians/ Preceptors Responsibilities: Actions/ Resources
Before placement begins:	<ol style="list-style-type: none"> 1. Review the existing Provincial Practice Education Guidelines: https://hspscanada.net/features/ 2. Familiarize yourself with the COVID-19 resources, BCCDC guidelines, Ministry of Health’s policies and Provincial Health Officer (PHO) Orders: 3. Review the PHO Facility Staff Assignment Order to determine if your discipline and the sites where you provide services are under the PHO order. If yes, ensure the student does not have any other concurrent role (employment, volunteer or student) at another site under the PHO order. 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. <ul style="list-style-type: none"> ○ If there is limited capacity, prioritize placements for students nearing their program completion, or who already are licensed to practice.
During the placement:	<ol style="list-style-type: none"> 1. Provide all site-specific and infection control COVID-19 guidelines to the student. http://www.bccdc.ca/health-professionals/clinical-resources/covid-19-care 2. Ensure the student follows required processes and protocols: <ul style="list-style-type: none"> ○ Complete the COVID-19 symptom Self-Assessment prior to each shift. ○ Adhere to the dress code policies. ○ Follow the process for what to do if the student becomes symptomatic. ○ Guide students in accessing resources and supports. 4. Provide appropriate PPE to students and faculty for placements. 5. Model/monitor all COVID-19 infection prevention and control practices to prevent transmission and spread of the virus. 6. Modify placement areas and patient assignments as required in concert with the post-secondary institution. <ul style="list-style-type: none"> ○ Determine whether students will be able to provide care to presumptive-positive patients or patients with confirmed COVID-19, when the required competencies, supervision and infection prevention and control practices are in place.
Troubleshooting, should placement continuity issues develop:	<ol style="list-style-type: none"> 1. Should issues arise during the placement that may affect the successful completion of the practice education 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. <p>HCOs (e.g. clinicians or preceptors) HCOs considering cancelling student placements should work with their senior leaders, MoH, other HCOs and PSI partners to explore possible alternatives before a final decision is made.</p>

Guideline Contributors and Reviewers

Contributors

- Ministry of Health, Nursing Policy Secretariat
- Provincial Health Services Authority, Academic Education
- Ministry of Advanced Education, Skills and Training, Post Secondary Policy and Programs
- Ministry of Health, Allied Health Policy Secretariat

Reviewers

- Health Education Reference Council
- Provincial Nursing and Allied Health Council
- Health Authority Practice Education Committee
- COVID-19 Clinical Reference Group
- Provincial Infection Control Network (PICNet)
- Deputy PHO, Office of the Provincial Health Officer
- PHSA, Vice President of Public Health and Wellness

References

COVID-19: Clinical Resources for Health Professionals providing care, BC Center for Disease Control, <http://www.bccdc.ca/health-professionals/clinical-resources/covid-19-care/infection-control>

COVID-19 Self-Assessment Tool: <https://bc.thrive.health/covid19/en>

Infection, Prevention and Control measures for Novel Coronavirus, Ministry of Health Policy Communique, May 19, 2020 <https://www2.gov.bc.ca/assets/gov/health/about-bc-s-health-care-system/office-of-the-provincial-health-officer/reports-publications/covid-19-infection-prevention-control.pdf>

Nursing Education Council of British Columbia: NECBC Position on Practice Education during the COVID-19 Pandemic (March 19, 2020).

Order of the Provincial Health Officer: Long-term care facility staff assignment order, April 15, 2020. <https://www2.gov.bc.ca/assets/gov/health/about-bc-s-health-care-system/office-of-the-provincial-health-officer/covid-19/covid-19-pho-order-long-term-care-facility-staff-assignment.pdf>

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)

Provincial Practice Education Guidelines (2013): <https://hspscanada.net/features/>

- Introductory Module http://www.hspscanada.net/docs/PEG/PEG_IntroModule.pdf
- Practice Education Guideline: Immunizations
http://hspscanada.net/docs/PEG/1_3_Immunization.pdf
- Practice Education Guideline: Respiratory Protection
http://hspscanada.net/docs/PEG/1_4_Respiratory_Protection.pdf
- Practice Education Guideline: Orientation: On-site Faculty
http://hspscanada.net/docs/PEG/1_5_Orientation_On_Site_Faculty.pdf
- Practice Education Guideline: Orientation: Students
http://hspscanada.net/docs/PEG/1_6_Orientation_Students.pdf
- Practice Education Guideline: Consent for Student Involvement in Care
http://hspscanada.net/docs/PEG/4_1_consent_involve_care.pdf
- Practice Education Guideline: Vehicle/Ride Along Use
http://hspscanada.net/docs/PEG/2_6_Vehicle_Ride_Along-Use.pdf