

Site Applicability

This guideline applies across all areas of BC Children's Hospital and BC Women's Hospital and Health Centre (CW).

Practice Level

This guideline applies to all staff, students, medical care providers, and academic faculty participating in or facilitating education.

Facilitators/instructors are responsible for:

- Working in collaboration with Operational, Practice, and other Education Leaders to identify education priorities in the context of potential risks associated with COVID-19.
- Developing and implementing alternative virtual and/or face-to-face (F2F) learning and assessment strategies as indicated
- Implementing risk mitigation strategies for F2F education activities

Education Participants are responsible for active participation in education activities and adherence to the risk mitigation strategies outlined for the education activity.

Guideline Statements

- Adhere and align with all BC Ministry of Health (MOH) directives, BC Centre for Disease Control (BCCDC) and WorkSafeBC guidelines for restoration of services.
- Adhere to and align with Provincial Health Services Authority (PHSA), CW Clinical and Infection Prevention and Control (IPAC), and Workplace Health & Safety clinical support documents.
- Align with ethical decision-making as per the [COVID-19 Provincial Ethical Decision-Making Framework](#).
- Ensure responsible stewardship of healthcare resources at all times.
- Ensure staff safety and reduce the risk of person-to-person transmission with particular emphasis on [IPAC Principles of Routine Practices](#), including [hand hygiene](#), [respiratory etiquette](#) and [Physical Distancing While at Work](#). These continue to be the most effective measures to prevent transmission of infection.
- Employ virtual learning alternatives and limit face-to-face education whenever possible as a measure to minimize the risk of transmission in alignment with the hierarchy of controls.
- Practice flexibility for Service Changes as per Pandemic response triggers.

Guideline

Prior to Education

Education Planning

- Facilitators will determine what components of the education activity can be done through virtual learning to reduce face-to-face contact as much as possible. Please refer to [Appendix A: CW COVID-19 Education Delivery Framework](#) for guidance for guidance and recommendations on delivery education activities during COVID-19. .
- Education activities should be conducted with the minimal required participants and facilitators. No outside observers or visitors will be admitted to the education activity.
- Video recording or streaming technologies will be used when possible to minimize gathering of groups. This requires advance notice when booking technical support through either Simulation or Media Production (MPS) services (at least 2 weeks in advance for a new request).

Scheduling

- External participants (non-employees) will be permitted to participate in education activities. This will be reassessed on an ongoing basis.
- All external participants (non-employees) will be required to complete the CW COVID-19 Education Curriculum prior to attending any onsite education activities.
- Education activities will be scheduled to allow for adequate time between groups for cleaning of the space and equipment.
- The number of participants in a physical space during an education activity is determined by the maximum room occupancy limits (see [Oak Street Campus Meeting Room Search](#) from [Oak Street page on POD](#)). Occupancy limits take into account the unencumbered floor space (square metres) in a room with people at a 2 metre distance from one another.
- The maximum number of participants, including facilitators, in any education activity should be kept to 25 to 30 at any time, regardless if there is additional physical space in a room (e.g. Shaughnessy Auditorium).
- Consider prioritization of education activities to minimize impact on resources, such as physical space, PPE, and cleaning supplies. [see [Appendix A: CW COVID-19 Education Delivery Framework](#)]

Space

- Ensure booking of space occurs well in advance and that the room booking safely accommodates the planned number of participants and facilitators per the maximum occupancy determined. Maximum occupancy signage will be posted at entrance of all education rooms.
- Reconfigure learning spaces to meet physical distancing requirements of 2 metres of separation between participants. A room set-up can be requested ahead of the education activity through Logistics (see [room set up request form](#)).
- Keep only essential furniture (i.e. chairs, tables, etc.) and other supplies in rooms to reduce potential for contaminated surfaces.
- When air ventilation is limited, fans may be used.
- Facilitators are encouraged to assess room location and equipment requirements prior to all education activities to ensure space requirements are adequate.

Screening

- All facilitators and participants, including external participants (non-employees), are encouraged to use the [PHSA staff screening tool](#) prior to arriving to in-person education.
- All participants, including external participants (non-employees), and facilitators will follow [PHSA COVID-19: Attending the Worksite Procedures](#) and [PHSA COVID-19: Becoming Sick Procedures](#) to ensure staff safety.
- For further information, refer to [PHSA COVID-19 Resources for Staff](#) on the PHSA website.

Communication

- CW COVID-19 Education Operating Guidelines will be communicated to all facilitators and participants for review prior to the education activity.
- Hand hygiene, respiratory etiquette and physical distancing signage is posted and clearly visible in education spaces.
- Facilitators are encouraged to ensure communication of [Workplace Wellness: Coping during COVID-19](#) resources are made available to participants.

During Education

PPE

- When a 2 metre distance cannot be maintained, surgical masks are to be worn. Use of PPE is extended as per the [COVID-19: PPE Use - Application Of PPE Emergency Prioritization Policy](#)
- N95 masks will not be used in alignment with the [COVID-19: PPE Use - Application Of PPE Emergency Prioritization Policy](#)
- Facilitators will ensure adequate supplies (e.g. masks, gloves, etc.).

Environmental & Equipment Cleaning

- Routine cleaning for non-clinical rooms will be done by Environmental Services once a day. If additional cleaning is required, this is done by the user group, and supplies provided by the clinical program.
- If a water cooler is in the location of the education activity, ensure proper cleaning has been done before allowing usage per the [CW Cleaning & Accessing Water Coolers Procedure](#).
- Food is not to be consumed in any of the education spaces. Drinks are permitted.
- Facilitators will ensure adequate cleaning supplies, if needed (e.g. surface disinfectants, etc.)

Supporting Documents

- [Principles of Routine Practices](#)
- [Physical \(Social\) Distancing Guidelines at Work](#)
- [COVID-19: PPE Use - Application of PPE Emergency Prioritization Policy](#)
- [Cleaning & Accessing Water Coolers](#)
- [Management of C&W COVID Positive Staff and Contact Tracing: Algorithm](#)
- [COVID-19: Management of Contact Tracing When a Staff Tests Positive: Guideline](#)

Additional Resources

- [BCCDC Do Not Enter If You Are Sick POSTER](#)
- [BCCDC How to Wash Your Hands POSTER](#)
- [BCCDC Physical Distancing POSTER](#)
- [BCCDC How to Wear a Face Mask POSTER](#)

References

- Government of Canada. Preventing COVID-19 in the workplace: Employers, employees and essential service workers. Retrieved May 13, 2020 from <https://www.canada.ca/en/public-health/services/publications/diseases-conditions/preventing-covid-19-workplace-employers-employees-essential-service-workers.html>
- WorkSafeBC. Preventing exposure to COVID-19 in the workplace: A guide for employers. (2020). Retrieved May 13, 2020 from <https://www.worksafebc.com/en/resources/about-us/guides/preventing-exposure-to-covid-19-in-the-workplace?lang=en>
- WorkSafeBC. Health professions: Protocols for returning to operation. (2020). Retrieved June 4, 2020 from: <https://www.worksafebc.com/en/about-us/covid-19-updates/covid-19-returning-safe-operation/health-professionals>

Definitions

Staff means all employees (including management and leadership), medical staff members (including physicians, midwives and dentists), nurse practitioners), residents, fellows and trainees, health care professionals, and students.

Appendices

[Appendix A: CW COVID-19 Education Delivery Framework](#)

Developed By

New Knowledge & Innovation – Senior Leader

Version History

DATE	DOCUMENT NUMBER and TITLE	ACTION TAKEN
01-Sept-2020	C-0506-07-60799 CW COVID-19 Education Guidelines: Clinical Education	Approved at: C&W Best Practice Committee

Disclaimer

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Appendix A: CW COVID-19 Education Delivery Framework

The purpose of this decision-making guide is to support educational leaders across the CW campus in the process of providing ongoing education activities in a manner that aligns with strategic priorities and supports current and potential pandemic priorities. This document is meant to be used in conjunction with the **CW COVID-19 Operating Guidelines – Clinical Education and CW COVID-19 Operating Guidelines - Simulation**. Please ensure you have reviewed the principal documents, specifically the Guiding Principles to provide further context. During this time, decisions regarding education delivery will require flexibility in response to changing pandemic conditions.

The following steps and considerations will help guide decisions for education planning and delivery (*Please refer to or connect with NKI for additional support or resources).

Step 1: Prioritize Education Activities

Imperative to successful restoration of all healthcare services, including staff development, is thoughtful analysis of current and future education activities and plans to mitigate risk associated with COVID-19. The competing priorities of ensuring staff safety, limiting PPE use to conserve supply, and reducing the impact on healthcare resources (i.e. financial, logistical, facilities management and environmental services, education support time and human resource impacts) requires Education Leaders to be mindful of the risks posed by education delivery on the larger healthcare system and to make sustainable decisions for education service restoration.

CW Education Leaders are encouraged to review the education activities that they currently offer and develop a process for prioritizing education activities that pose risks if not delivered and that may impact patient safety, legal or regulatory standards and/or operational resources.

Recommendation for Prioritizing Education Activities (*Please note: list is not exhaustive)	
HIGH	Initial certification or mandatory course required to work in a critical care, high-acuity or specialty practice setting (i.e. OR, ED, NICU, PICU, Birthing, etc.), including academic programming partnerships
	Initial certification or mandatory course required to provide care to a specialized patient population or practice setting (i.e. Triage, Chemotherapy, etc.) including academic programming partnerships
	New foundational competency development required to work in a specialty care area or practice setting
	New advanced competency development required to work in a specialty care area or practice setting
	Orientation/onboarding requirements or for new hires/new providers in hard-to fill practice settings.
MODERATE	Educational requirements to support Accreditation Canada standards (exclusive of any education activities categorized as High Priority).
	Educational requirements to support program-specific accreditation standards (i.e. BCCH Trauma Service, Baby-Friendly, etc.)
	Educational requirements or recommendations to support critical patient safety event reviews (CPSER) (exclusive of any education activities categorized as High Priority).
	Recertification or mandatory course required to maintain competency in a critical care, high-acuity or specialty practice setting (i.e. OR, ED, NICU, PICU, Birthing, etc.), including academic programming partnerships
	Recertification or mandatory course required to maintain competency in providing care to a specialized patient population or practice setting (i.e. Triage, Chemotherapy, etc.) including academic programming partnerships
LOW	Continuing professional development education (i.e. Annual Education Days, non-technical skill development, etc.)
	Other educational activities to promote professional development goals on an individual or group basis

Step 2: Implement Alternative Learning & Assessment Strategies

In an effort to support pandemic priorities, CW Education Leaders will work to employ virtual learning alternatives and limit face-to-face education whenever possible. Educational development and delivery decisions, including the activities planned and modalities used, may differ from current practices and may pose additional challenges for facilitators. Although in-person and F2F delivery may appear to be the best modality for specific components of an education activity, there are many active learning strategies that can be implemented to not only achieve the desired learning goals and outcomes, but to also provide more meaningful learning experiences and environments.

“Deep and meaningful formal learning is supported as long as one of the three forms of interaction (student–teacher; student-student; student-content) is at a high level. The other two may be offered at minimal levels, or even eliminated, without degrading the educational experience. High levels of more than one of these three modes will likely provide a more satisfying educational experience, though these experiences may not be as cost or time effective as less interactive learning sequences” (Terry Anderson’ Interaction Equivalency Theorem, 2013; based on 2003 original theory)

CW Education Leaders are encouraged to use this as an opportunity to innovate, develop new education-related competencies in virtual facilitation and to promote sustainable, learner-driven best practices in education (i.e. adult learning principles, modern learning pedagogy, active learning strategies, etc.)

➤ **Step 2.1: Modify Theoretical Education Components**

Education activities related to content-delivery, knowledge attainment, and critical thinking, judgement and reflection competencies, etc. can be successfully facilitated using online and virtual approaches. Both synchronous learning strategies (online or distance education that happens in real-time) or asynchronous learning strategies (online or distance education that happens without real-time interaction) can be adopted to achieve desired learning goals for theoretical education components.

Recommended Strategies for Modifying Theoretical Education Delivery *Please note: list is not exhaustive		
Online Quiz & Self-Test	Discussion Forums	Online Feedback
Journaling	Assignment Dropbox	Blogs
Online gradebook	Videos	Podcasts
Internet Search	e-Journal Search	Social Networking
ePortfolios	Wikis	Guest Speakers
Pre-session learning activities	Group Discussion	Virtual Platforms
Videoconferencing	Teleconferencing	Training Videos

➤ **Step 2.2. Modify Practical Education Components**

Education activities that include practical (hands on) elements may be more difficult to adapt and there may be aspects that are more likely to achieve desired learning goals if delivered in-person or during a face-to-face (F2F) session. These include education activities related to psychomotor skill development, practice and/or validation, clinical scenario practice through simulation and orientation to the physical clinical environment and/or equipment, etc. Maximizing or supplementing existing or potential clinical experiences can help achieve desired learning goals for practical education components.

Recommended Strategies for Modifying Practical Education Delivery *Please note: list is not exhaustive	
Supplementing pre and post clinical learning via Strategies outline in Step 2.1	
Extending preceptorship timeframe to allocate for additional clinical practice (i.e. Increased # of preceptorship shifts)	Shifting practical components to occur during orientation in the clinical setting
1:1 time with Clinical Educator	Insitu simulations
Video recording / Live streaming	Videoconference to discuss Standardized Patient Cases
Individual Learning Plans	Virtual reality
Coaching	Peer Learning

Step 3. Implement Risk Mitigation Factors

In the event that the decision is made to proceed with in person or F2F education activities, Education Leaders must actively plan for the risk mitigation factors in accordance with the CW COVID-19 Education Guidelines and the CW COVID-19 Simulation Guidelines.

CW Education Leaders are encouraged to practice stewardship, leadership and advocacy in implementing the CW COVID-19 Operating Guidelines – Clinical Education to promote safe restoration of all education activities.

Required Strategies for Mitigating Education Delivery Risks *Please note: list is not exhaustive	
Core Principle	Facilitator Action(s)
Scheduling	<ul style="list-style-type: none"> ▪ Plan for changing requirements based on pandemic conditions. ▪ Implement education delivery modifications as early as possible, if needed. ▪ Develop a backup plan in case in-person education is not possible or space is limited
Space	<ul style="list-style-type: none"> ▪ Do not exceed the maximum room occupancy limits (sign posted on door). ▪ Always complete a self-check of education space prior to actual delivery. ▪ Split the education session into smaller group sizes at different times, if needed.
Screening	<ul style="list-style-type: none"> ▪ Ensure active screening for symptoms of COVID-19 is communicated and applied. ▪ No participants and/or facilitators to attend education session if symptomatic for COVID-19 ▪ Plan accommodations for any participants who may be feeling well but have symptoms
Hand Hygiene & Reparatory Etiquette	<ul style="list-style-type: none"> ▪ Reinforce and model best practice throughout entire education session. ▪ Ensure all participants and facilitators practice diligent hand hygiene/respiratory etiquette
Physical Distancing	<ul style="list-style-type: none"> ▪ Reinforce and model best practice throughout entire education session. ▪ Request room set up that facilitates physical distancing requirements. ▪ Rearrange furniture, equipment, etc. if required to physical distancing requirements.
PPE	<ul style="list-style-type: none"> ▪ Reinforce and model best practice throughout entire education session. ▪ If physical distancing requirements cannot be maintained, ensure all participants and/or facilitators are wearing required PPE (surgical/face mask) ▪ Ensure all participants and/or facilitators extend the use of all PPE per CW COVID-19 PPE Use – Application of PPE Emergency Prioritization Policy ▪ No participants and/or facilitators are to wear N95 masks, unless already donned in a clinical setting and extended use principles are in place
Environmental & Equipment Cleaning	<ul style="list-style-type: none"> ▪ No participants and/or facilitators to consume food in education space. Drinks are permitted. ▪ If water cooler available in education space, ensure single-use cups are available.
Communication	<ul style="list-style-type: none"> ▪ Ensure communication of CW COVID-19 Operating Guidelines – Clinical Education to all participants and/or facilitators (i.e. pre-course email, LearningHUB course info, etc.)
All	<ul style="list-style-type: none"> ▪ Ensure adequate amount of all required supplies (i.e. hand hygiene, respiratory etiquette, PPE) is available.