TITLE
MANAGING STUDENTS INVOLVED IN PLACEMENTS DURING A COMMUNICABLE DISEASE OUTBREAK, EPIDEMIC, OR PANDEMIC

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OBJECTIVES
• To provide guidance for Alberta Health Services (“AHS”) staff and post-secondary students, instructors, and faculty at educational institutions for seamless health care operations while supporting the continuation of student participation in placements in AHS facilities during any communicable disease event (Appendix A), including influenza like illness (“ILI”) outbreaks (Appendix B), gastrointestinal illnesses (“GI”) outbreaks (Appendix C), epidemics, or pandemics (Appendix D).

• To provide guidelines, based on outbreak management principles, for the management of students during any communicable disease event with additional information specific to pandemic situations.

• To minimize health risks to AHS patients, staff, students, and the educational institution’s instructors while they are engaged in placements during any communicable disease event.

• To prevent, minimize, and/or manage disruptions to the education of students who are engaged in placements within AHS facilities.

• To facilitate compliance with the Student Placement Agreements.

APPLICABILITY
Compliance with this guideline is required by all AHS employees, members of the medical and midwifery staffs, students, instructors, volunteers, and other persons acting on behalf of AHS (including contracted service providers as necessary). This guideline is subject to all applicable laws.
This guideline is applicable to all clinical and non-clinical placements within patient care facilities.

Observership, job shadow, and high school or government program work experience students will be assessed on an individual basis (contact student.strategies@albertahealthservices.ca).

GUIDELINE

1. Guiding Principles

1.1 In case of conflict between this document and the Student Placement Agreement, the Student Placement Agreement shall prevail unless otherwise required by law.

1.2 AHS’ top priority is the care and safety of patients, clients, and residents and will be critical to decisions related to student placements during any communicable disease event.

1.3 AHS is committed to educational institutions providing quality learning opportunities for their students during any communicable disease event.

1.4 Dealing with emergency and crisis situations is an integral part of health care education; therefore, whenever possible, students should not be excluded from participating during a communicable disease event.

1.5 During a communicable disease event, the management of student placements will be determined by the Zone Medical Officer of Health (“MOH”) within the responsibilities granted to MOHs per the Alberta Public Health Act.

1.6 The following factors should be considered in a decision regarding management of student placements:
   a) availability of AHS staff to offer appropriate supervision to students (consider degree and number of staff illnesses, redeployment of staff).
   b) competency and ability of students.
   c) availability of educational institutions’ support resources.
   d) impact on the care and safety of patients.

1.7 In consultation with required stakeholders, the Zone MOH will decide on how to best support students and instructors and will initiate communication with (in no specific order):
   a) the manager of the area/program;
   b) site administration;
c) AHS’ Infection Prevention & Control (IPC) department;

d) the Senior Medical Officer of Health;

e) Educational Institutions;

f) Health Professions Strategy and Practice (student.placements@albertahealthservices.ca); and

g) Student Engagement and Employment (student.strategies@albertahealthservices.ca).

1.8 The Zone MOH has the legislative responsibility and authority to take steps to prevent the spread of a communicable disease. An electronic communication will be provided to the educational institution’s primary contact to disseminate to all faculties with potential for AHS student placements in the affected location(s). This communication will be provided if the situation dictates that students or instructors, who do not have appropriate proof of immunity, be removed from a placement within a facility affected during a communicable disease event. The communication will include:

a) the communicable disease, its applicable symptoms, and mode of transmission;

b) the locations affected by the communicable disease event;

c) the effective date(s) of the communicable disease event;

d) the vulnerable populations affected;

e) the required immunizations or proof of immunity required for students and instructors to continue within their assigned placement;

f) a link to current online information relating to the communicable disease event;

g) the requirement for ongoing dialogue between education institutions and AHS to ensure support for students and assist in determining their requirement for prophylaxis and immunization. The names of inadequately immune students or instructors on placement will be sent to the AHS point of contact by the educational institution. Prophylaxis, immunization, alternative placement, or suspension from placement will be determined for these individuals;

h) the situations in which a student or instructor would be allowed to continue or return to a placement within an affected location;

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i) the length of time a student or instructor must remain away from a placement if showing symptoms; and

j) the direct AHS contact for additional information or questions regarding the management of students or instructors during the event.

1.9 In situations where student placements are able to continue, disruption to ongoing curricula should be minimized to the furthest extent possible. During a communicable disease event, but prior to suspension of placement, student participation in the placement will continue to be determined by the educational institution.

1.10 AHS recognizes that its partnerships with educational institutions are important and will collaborate with those institutions to attempt to make alternate arrangements for students in the case of a communicable disease event that inhibits continuation of a placement. All reasonable efforts to accommodate placements will be made.

1.11 The referenced algorithms provide the emergency management structure and communication pathways.

DEFINITIONS

Communicable Disease Event means an outbreak, epidemic, or pandemic caused as a result of a communicable disease transmitted from one person to another by an infectious agent, such as a virus, parasite, or bacteria. An event is determined when the known cases of a specific communicable disease exceed what is expected in a given time frame and location based on recent experience.

Educational Institution means any post-secondary educational institution offering an educational program that requires a placement within AHS owned and operated facilities, or an organization representing a student or instructor within a placement setting.

Epidemic means a communicable disease event that has spread to multiple AHS Zones or provinces. An epidemic is declared by the Senior Medical Officer of Health and monitored by the Emergency Coordination Centre (ECC).

Instructor means one or more individuals participating in the placement to include those engaged by and under the employment or direction of the educational institution to provide services for the educational institution for students registered in the educational program.

Outbreak means a localized communicable disease event contained within an AHS Zone or facility. An outbreak is declared by the Zone Medical Officer of Health (Zone MOH) and monitored by the Zone Emergency Operations Centre (ZEOC).

Pandemic means a communicable disease event that has spread to other countries or continents. A pandemic is declared and monitored by the World Health Organization.
**Placement** means the practicum placement of a student or instructor with AHS for the purpose of fulfilling the practical component of an educational program.

**Student** means one or more individuals registered in an educational program participating in a placement, and excludes post graduate medical residents, fellows, or any other student who receives a wage or salary directly from AHS.

**Student Placement Agreement** means the agreement, all schedules attached to the agreement, and all written amendments related to the agreement signed by both the educational institution and AHS related to the placement of students and instructors within AHS sites/facilities for the purpose of fulfilling the practical component of an educational program.

**REFERENCES**
- Appendix A – Communicable Disease Outbreak
- Appendix B – Influenza-Like-Illness Outbreak
- Appendix C – Gastrointestinal Illness Outbreak
- Appendix D – Pandemic
- AHS Policies
  - Hand Hygiene (#PS-02)
- Algorithms
  - Communicable Disease Event Student Placement Algorithm
  - Communicable Disease Event Student Placement Algorithm - Managers
- Student Placement Agreement
- *Public Health Act* (Alberta)
- *Communicable Diseases Regulation* (Alberta)

**REVISIONS**
None
APPENDIX A

Communicable Disease Outbreak

A communicable disease is, for the purpose of this guideline, a disease caused by an infectious agent such as a virus, parasite, or bacteria that can be transmitted from one individual to another. Specific symptoms vary depending on the type of communicable disease involved in the outbreak. When an outbreak is announced, the specifics of the disease involved will be communicated to AHS staff and the public on the AHS website: www.albertahealthservices.ca.

1. Guidelines for Managing Students During a Communicable Disease Outbreak

1.1. Students and educational institution instructors are expected to comply with relevant policies and regulations around infection control, surveillance, and occupational health and safety.

1.2. Students and educational institution instructors should familiarize themselves with the signs and symptoms of the specific communicable disease announced in an outbreak and perform daily self-assessments for the relevant symptoms. If any student or educational institution instructor shows symptoms, they must not attend the placement. Details relating to the length of time to be removed from the placement will be released with information detailing the specific communicable disease in the outbreak.

1.3. Prompt reporting to AHS permits early identification and interventions that interrupt transmission, reducing morbidity and mortality.

1.4. Rubella is a required vaccination under the Public Health Act’s Communicable Diseases Regulation (Alberta) for all health care workers. Vaccinations identified in the “Standard for Immunization of Post-Secondary Health Care Students and Students in Other High-Risk Occupational Programs” are strongly recommended for students and educational institution instructors participating in AHS placements. A lack of proof of immunity may impede continuation of a placement during a communicable disease event. Updates should be reported to the educational institution when additional vaccinations are completed, including the annual influenza vaccination.

1.5. N95 respirators are required by AHS under the Occupational Health and Safety Code (Alberta) under certain circumstances. AHS requires fit testing and training to be completed every 2 years. Not being N95 fit tested may impede continuation of a placement during a communicable disease event. Fit testing is the responsibility of the educational institution.

1.6. Asymptomatic students should not be excluded from participating during a communicable disease event. During the event, initial infection prevention and control measures include reducing the movement of students between floors/areas especially if some units are not affected. Infection Prevention and Control should be consulted. Students who have been exposed to the communicable disease may

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continue to participate in the placement unless they develop symptoms but may be restricted to the affected area.

1.7. The student assignment will be determined by the placement facility and faculty advisor in collaboration with the student. Factors to consider in the development of the patient assignment should include the student’s immune status, proof of N95 fit-testing with size of mask indicated if applicable, and the student’s competency in personal protective equipment utilization.

1.8. Risk of exposure of students and instructors are to be minimized. In the context of ongoing placements, these individuals are to be provided with the same protection (e.g. personal protective equipment, anti-virals, treatments, and vaccines) by AHS as is provided to AHS employees during communicable disease event.

1.9. It is expected that students and instructors will take steps to reduce their risk of exposure by proper hand hygiene (in accordance with the AHS Hand Hygiene policy), being aware of routine practices and additional precautions, and properly using appropriate personal protective equipment.

1.10. Recommendations for prophylaxis will be directed by the Zone MOH and the outbreak management team and may include exclusion from placement. Educational institution representatives and Health Professions Strategy and Practice (student.placements@albertahealthservices.ca) need to be informed of a decision to exclude students from a placement.

1.11. In communicable disease events, students who are pregnant or with medical conditions that place them at high risk for severe disease or complications from the communicable disease should reflect on their capacity to continue the placement with AHS. The students are to communicate with their educational institution’s Faculty Advisor.

1.12. If a student is exposed to a communicable disease via blood or body fluid, outbreak or other exposure method during a placement, they are to follow the Occupational Exposure to Blood and Body Fluids policy and specific Workplace Health and Safety processes and guidelines related to occupational exposure.
APPENDIX B

Influenza-like-Illness ("ILI") Outbreak

ILI Case Definition

For the purposes of this guideline, an ILI case means the acute onset of respiratory illness with fever and cough, AND with one or more of the following:

a) sore throat;
b) joint pain;
c) muscle aches; and/or

d) severe exhaustion.

ILI Outbreak Definition (Hospitals and Residential Institutions):

For the purposes of this guideline, an ILI outbreak means two or more cases of ILI within a seven (7) day period with a common epidemiological link (e.g. same location or same caregiver, and evidence of healthcare-associated transmission within the unit or facility), or which at least one is a laboratory confirmed case.

NOTE: ILI is a term used to describe a constellation of symptoms. It is not necessarily caused by Influenza. Other respiratory organisms commonly associated with ILI, in addition to Influenza A & B, include but are not limited to: Respiratory Syncytial Virus (RSV), parainfluenza, human metapneumovirus, and coronavirus. Appropriate infection control practices and additional precautions will be reviewed at the time the outbreak is confirmed.

1. Guidelines for Managing Students During an ILI Outbreak

1.1. Students and educational institution instructors are expected to comply with relevant policies and regulations around infection control, surveillance, and occupational health and safety.

1.2. All students and instructors should be performing daily self-assessments for ILI symptoms. Detailed information about ILI symptoms and self-assessments can be found on AHS’ external website (http://www.albertahealthservices.ca/influenza.asp). If any student or educational institution instructor has ILI symptoms, they must not attend the placement and should stay home for the designated time determined by the Zone MOH at the time the outbreak is declared.

1.3. Prompt reporting to AHS permits early identification and interventions to interrupt transmission, reducing morbidity, and mortality.

1.4. Annual influenza vaccination is strongly recommended for students and educational institution instructors. A lack of proof of immunity may impede continuation of a placement during an ILI event.
1.5. N95 respirators are required by AHS under the Occupational Health and Safety Code (Alberta) in the event of an influenza like illness. AHS requires fit testing and training to be completed every 2 years. Not being N95 fit tested may impede continuation of a placement during a communicable disease event. Fit testing is the responsibility of the educational institution.

1.6. Asymptomatic students should generally not be excluded from participating during a communicable disease event. During an ILI event, initial infection control measures include reducing the movement of students between unit/facility areas especially if some units are not affected. Infection Prevention and Control practitioners should be consulted. Students who have been exposed to ILI may continue to participate in the placement unless they develop symptoms.

1.7. Infection risks among students and educational institution instructors are to be minimized. In the context of ongoing placements, these individuals are to be provided with the same protection (i.e. personal protective equipment, prophylaxis, treatments, and vaccines) by AHS as is provided to AHS employees during an ILI event.

1.8. Recommendations for prophylaxis in ILI events will be directed by the Zone MOH and the outbreak management team and may include exclusion from practicum.

1.9. It is expected that students and instructors will take steps to reduce their risk of exposure by proper hand hygiene (in accordance with the AHS Hand Hygiene policy), being aware of routine practices and additional precautions, and properly using appropriate personal protective equipment. Current information regarding ILI, additional precautions, and proper personal protective equipment use can be found on AHS’ external website (http://www.albertahealthservices.ca/2919.asp).

1.10. In ILI events, students who are pregnant or with medical conditions that place them at high risk for severe disease or complications should reflect on their capacity to continue the placement with AHS. They are to communicate with their educational institution’s Faculty Advisor.

2. Placement Coordination of Instructor Guided Student Groups in Units/Service Areas During an ILI Event:

2.1. A student group is comprised of one or more students and an educational institution instructor.

2.2. Student groups will be permitted to continue on units/service areas where there is known or suspected ILI if they have been fitted for N95 respirators and are immunized/taking determined prophylaxis.

2.3. It is expected that the educational institution instructor will be able to verify the immunization and N95 fit test status of all students in the group and attempt to create student assignments that minimize unnecessary risk. Factors to consider in the development of the patient assignment should include the student’s immunization status, whether they are N95 fit-tested, their competency in personal protective
equipment utilization, patient acuity, and the availability of appropriate supervision. Immunization must be a priority and N95 respirators the last resort. Unless there are extraordinary reasons, students are expected to be immunized.

2.4. In order for a group placement to continue, it must be supported by an educational institution instructor.

2.5. If the event necessitates the use of an N95 respirator, those students who are not fit tested may be suspended from the placement. Educational institution representatives and Student Placement (student.placements@albertahealthservices.ca) need to be informed of this decision.

3. Placement Coordination of Precepted Students in Units/Service areas during an ILI Event:

3.1. Precepted placements are defined as no more than two students assigned to a preceptor who is an AHS employee.

3.2. Precepted placements will be permitted to continue on units/service areas where there is a known or suspected ILI event if the students have been immunized and fitted for N95 respirators.

3.3. The student assignment will be determined by the preceptor and faculty advisor in collaboration with the student. Factors to consider in the development of the patient assignment should include the student’s immune status, proof of N95 fit-testing with size of mask indicated, student’s competency in personal protective equipment utilization, patient acuity, and the availability of appropriate supervision.

3.4. Precepted students who are N95 fit tested and immunized may be assigned to patients with ILI and may be involved in Aerosol Generating Medical Procedures (“AGMP”).

3.5. If the event necessitates the use of an N95 respirator, those precepted students who are not immune and not N95 fit tested may be suspended from the placement. Educational Institution representatives and Student Placement (student.placements@albertahealthservices.ca) need to be informed of this decision.
Gastrointestinal Illness Outbreak

Gastrointestinal (GI) Illness Case Definition

For the purposes of this guideline, a GI illness case is when at least ONE of the following criteria is met and not attributed to another cause (e.g. C. diff (CDI), medication, laxatives, diet, or prior medical condition):

a) Two or more episodes of diarrhea (loose or watery stools) in a 24-hour period, or above what is normally expected for that individual.

b) Two or more episodes of vomiting in a 24-hour period.

c) One or more episodes of vomiting AND diarrhea in a 24-hour period.

d) Positive stool culture of a known enteric pathogen AND at least one symptom compatible with a GI infection (e.g. nausea, vomiting, diarrhea, abdominal pain, or tenderness).

e) One episode of bloody diarrhea.

GI Illness Outbreak Definition

For the purposes of this guideline, a GI illness outbreak means two or more cases (with initial onset within one 48-hour period) of GI illness with a common epidemiological link (e.g. same location or same care giver, and evidence of health care-associated transmission within the facility).

1. Guidelines for Managing Students During a GI Event

1.1. Students and educational institution instructors are expected to comply with relevant policies and regulations around infection control, surveillance, and occupational health and safety.

1.2. All students and educational institution instructors should be performing daily self-assessments for GI symptoms. If any student or educational institution instructor has GI symptoms, they must not attend the placement and should stay home until 48 hours after the last episode of vomiting and/or diarrhea.

1.3. Students who have been exposed to a GI event may continue to participate in the placement unless symptoms develop.

1.4. Asymptomatic students should generally not be excluded from participating during a GI event. During a GI event, initial infection prevention and control measures include reducing the movement of students between units/areas especially if some units are not affected. Infection Prevention & Control should be consulted when making decisions about management of student placements.

1.5. It is expected that students and instructors will take steps to reduce their risk of exposure by proper hand hygiene (in accordance with the AHS Hand Hygiene policy),

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being aware of routine practices and additional precautions, and properly using appropriate personal protective equipment. Current information regarding GI, appropriate additional precautions, and proper personal protective equipment use can be found on AHS’ external website (http://www.albertahealthservices.ca/6854.asp and http://www.albertahealthservices.ca/6410.asp).

1.6. In GI events, students who are pregnant or with medical conditions that place them at high risk for severe diseases or complications should reflect on their capacity to continue their placement with AHS. They are to communicate with their educational institution’s Faculty Advisor.
APPENDIX D

Pandemic

1. Guidelines for Managing Students During a Pandemic

   1.1. A communicable disease event can spread to an epidemic (regional outbreak) or to a pandemic (multiple countries). Declaration of a pandemic is made by the World Health Organization (“WHO”) and is communicated to all jurisdictions.

   1.2. Issues that arise during a pandemic may include: increased staff absenteeism; increased patient volumes and acuity; limited or controlled supply of vaccine, antivirals, and/or antibiotics; disruption of some health services and community infrastructure (e.g. school closures); and supply management interruption (food, water, power, or community services).

   1.3. The WHO will determine the world phase of activation to mitigate the outbreak, and the Chief Medical Officer of Health (Alberta) will determine the activation and response levels. AHS, in conjunction with Senior MOH and the Zones’ sites and services, will establish an emergency management structure to coordinate the response and communication. The Chief Medical Officer of Health will establish an emergency management structure to coordinate Ministries and Federal Provincial Territorial (“FPT”) response.

   1.4. Dealing with emergency and crisis situations are an integral part of education to work in the health care system, therefore students should not be excluded from participating within the health system during a pandemic.

   1.5. Observership and job shadowing experiences are not recommended during a pandemic.

2. Suspension of Placements During a Pandemic:

   2.1. Continuing to meet students’ educational objectives may become impossible or undesirable at some point during a pandemic crisis.

   2.2. A decision to suspend placements in a specific AHS facility or all facilities within AHS may be made by:

      a) AHS or Alberta Health (“AH”) due to incapacity of sites;
      b) the Office of the Chief Medical Officer of Health, the AHS Senior Medical Officer of Health, or the local Medical Officer of Health in a declaration of a public health emergency; or
      c) the educational institution due to inability to meet educational objectives.

   2.3. Prior to a decision being finalized, the initiating organization will consult with the emergency management structure at the local hospital site which, in turn, will consult with the Zone Emergency Operations Centre (“ZEOC”).
2.4. All decisions related to cancellation of placements will be communicated to students by the educational institution.

2.5. The decision to suspend placements may need to be made individually for various units/programs depending on the extent to which services are disrupted by the pandemic and the competency and ability level of students. This will require day-to-day monitoring.

3. Volunteering During a Pandemic

3.1. Once the decision to suspend placements due to a pandemic has been made, students may be requested to volunteer their services to AHS outside the expectations of the educational program by request of the Medical Officer of Health. Volunteer activities should be tailored to the level of competency and ability of the student.

3.2. Once academic programs have been suspended, the deployment of volunteer medical students, residents, and fellows; nursing students; or students from other health disciplines will be determined by the AHS Department Heads.

3.3. The educational institution’s Department Heads, Placement Coordinators, Instructors, Deans, or Associate Deans will become advisory to the AHS Department Head with respect to the level of competency and ability of the student volunteers.

3.4. Assistance with deployment may come from the AHS departments responsible for placing students into their respective disciplines, including Health Professions Strategy and Practice Group, Student Engagement & Employment, or specific clinical support services.