



Guidance on COVID-19

Guidance Document on Infection Prevention and Control Practices in Relation to Delivering Face to Face Education during the Global COVID-19 Pandemic

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This guidance was developed in collaboration between the Office of Nursing and Midwifery Services Department and the Antimicrobial Resistance and Infection Control (AMRIC) Team

Version	Date	Changes from previous version				
1.1	05.07.2021	Updated to reflect change in terminology from extremely vulnerable to very high				
		risk.				
		Link to very high risk (extremely vulnerable) group categorisation				
		Information on vaccination and its role in reducing risk associated with delivering				
		face to face education				
		Reference to the need to consider the Framework Level for Public Health				
		restrictions in effect at the time				
		Updated to reflect benefits of vaccine protection				
1.0	30.07.2020	Original guidance document				

Note: If you have any queries on this guidance please contact the AMRIC team at hcai.amrteam@hse.ie

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Purpose

The purpose of this guidance document is to outline the Infection Prevention and Control (IPC) practices in relation to delivering face to face education for healthcare staff in the context of the global COVID-19 pandemic (hereafter referred to as *Guidance Document*).

This *Guidance Document* is underpinned and informed by relevant publications from the Department of Health (DoH), Health Service Executive (HSE), Health Protection Surveillance Centre (HPSC), Health and Safety Authority (H&SA) and the Nursing and Midwifery Board of Ireland (NMBI) professional regulatory body including:

- 1. Return to Work Safely Protocol COVID-19 Specific National Protocol for Employer and Workers (Government of Ireland, 2020).
- 2. HSE Approach to Return to Work Safely Protocol (HSE, 15th of May 2020).
- 3. Scope of Nursing and Midwifery Practice Framework (NMBI, 2015).

Target Audience

This *Guidance Document* applies to any person delivering and attending education and training programmes facilitated by Centres of Nursing and Midwifery Education (CNME) and Nursing and Midwifery Planning and Development Units (NMPDU). These programmes may take place onsite in CNME's, HSE facilities and outsourced non-HSE facilities. It is also applicable to other education and training events delivered by or for HSE staff.

Overall Approach to Management of COVID-19 Risk

Any assembly of people for any purpose is associated with a risk of transmission of infection. This is particularly true during a pandemic. Therefore, the first step in managing the risk is to consider if the assembly of people is required to achieve the teaching and learning objectives. When this is the only or is the optimal way to achieve the teaching and learning objectives and the risk can be managed, the pandemic should not be a barrier to necessary teaching and learning activities.

In any assembly of people, there are three components to managing COVID-19 related risk:

- 1. Taking all practical measures to ensure that no one with infectious COVID-19 is present in the group at any time. If the virus is not introduced into the group, it cannot spread. This relates to making sure that facilitators, participants and any supporting staff are not known to be infectious with COVID-19, are not contacts of people with COVID-19 who are required to restrict movements (note) and have no clinical features of COVID-19 (see details below). If all those attending the event have vaccine protection, the risk that anyone with infectious COVID-19 is present greatly reduced. [Note people who have vaccine protection do not generally need to self-isolated for 10 days if they are identified as COVID-19 contacts but there are exceptions in which people may be advised to restrict movements].
- 2. Taking all practical measures to reduce the risk that the virus will spread if introduced. This relates to the venue itself, it amenities and to the behaviour of all of those attending the event (see details below). If all those attending the event have vaccine protection, the risk that the virus will spread is greatly reduced.
- 3. Taking all practical measures to reduce the harm that will arise if the virus is introduced and spreads. The harm associated with introduction and spread of the virus depends on the age and underlying health status of participants, the speed with which any evidence of transmission is identified and managed and access to healthcare for those who need care (see details below). If all those attending the event have vaccine protection, the risk of harm from spread of COVID-19 is greatly reduced.

Vaccination

Vaccination against COVID-19 is a very effective way of protecting people against severe disease and death from COVID-19. As the months go by it is becoming clearer that the vaccine also helps to reduce the risk that someone can spread the infection to other people.

It is very important to say that vaccines do not provide protection from the day you get your first dose. The protection builds up over time. After two to three weeks you can expect to have some protection but you do not have the full benefit from the vaccine until after you have completed the vaccination course.

Individuals are considered to have vaccine protection as set out here:

- 1. 15 days after second dose of AstraZeneca (Vaxzevria);
- 2. 7 days after the second Pfizer-BioNTech dose (Comirnaty);
- 3. 14 days after the second Moderna dose (Spikevax);
- 4. 14 days after Janssen (one dose vaccination course).

If other vaccines become available the requirement for vaccination will be as advised by HSE.ie.

When you have vaccine protection, you can expect to have a very high degree of protection from severe COVID-19. However, the vaccine protection is not perfect and especially it may not work so well in people who have a condition or who are on a treatment that interferes with their immune system. This means that people are advised to continue to be very careful after vaccination especially if they have a problem with their immune system.

People with vaccine protection are also less likely to spread infection to other people. If you have vaccine protection and you meet with another person who has vaccine protection (a friend or a healthcare worker) the risk is much lower for both of you.

Minimising Risk of Spread of Infection Prior to the Event

Facilitators and learners should be reminded at pre-registration to consider if by virtue of their age or underlying health condition or vaccination status if they are at high risk of severe disease if they acquire COVID-19. People who are at high risk of severe disease should generally avoid attending gatherings and be particularly careful with respect to adherence to all IPC precautions if attendance is necessary. People who are at high risk of severe disease may participate on the same basis as other people if they have vaccine protection. Categorisation of very high risk (extremely vulnerable) groups can be found in the flowing link: https://www2.hse.ie/conditions/coronavirus/people-at-higher-risk.html

- Participants should confirm when registering for the event they are familiar with
 the symptoms of COVID-19 and will not attend if they have symptoms or if they
 have been advised to restrict movements because they are contacts of people with
 COVID-19. Note: Contacts who have vaccine protection may be exempt from
 restricting their movements except in certain circumstances but should follow
 public health advice in this regard.
- 2. If the facilitator or learner has been diagnosed with COVID-19 and is in the infectious period, or has symptoms of COVID-19 or other infectious disease, or has been identified as a contact of COVID-19 they should not attend the education/ training programme and inform their line manager immediately. Note: In so far as practical it is appropriate to plan for alternative facilitators to be available at short notice in case this happens.
- 3. If the learner or facilitator is currently working directly in a facility/ ward where there is a suspected or confirmed outbreak of COVID-19, they may attend the training provided they confirm they are not in the infectious period of COVID-19 illness, have not been advised to restrict their movements and have been following recommended IPC guidance. If they have vaccine protection they are less likely to pose a risk to others.

Minimising Risk of Spread of Infection During the Event

The facilitator must identify any levels of risk associated with the proposed training/education activities and include the necessary controls to manage the risk.

Education facilities and venues

- A risk assessment of the venue is recommended in line with the type of education session running to determine if the venue supports measure to limit the spread of infection and to identify additional measures that can be implemented (see Appendix 2).
- 2. Erect appropriate signage that promotes physical distancing/ respiratory etiquette/ hand hygiene. These should be clearly displayed in all areas.

- 3. Ensure appropriate hand hygiene facilities are in place to accommodate facilitators and learners to adhere to hand hygiene practices.
- 4. Ensure tissues, alcohol gel, and pedal bins are in place to accommodate facilitators and learners to adhere to respiratory hygiene and cough etiquette.
- All classrooms/ teaching spaces should allow for the recommended physical distancing both on entry to, and occupation of, as per HSE/HPSC guidelines. Where necessary, floor marking may be considered.
- 6. Promote good ventilation in so far as practical consistent with comfort and security.

 The goal is gentle air circulation rather than strong air movements.
- 7. All frequently touched surfaces should be cleaned at the end of the day or end of each session (e.g. prior to and immediately after each session if more than one session with different learners is taking place in one day).

Equipment

- 1. Single use items for simulation training should be used where possible.
- All reusable teaching equipment including mannequins and any medical devices should be cleaned before and after each training session/training day as per manufacturers' guidelines.
- 3. Training involving contact between the mouth and other types of equipment should be avoided unless essential.
- 4. Additional PPE including gloves and aprons are generally not required in training sessions in line with standard precautions.
- 5. Where Personal Protective Equipment (PPE) is required normally as part of the training e.g. teaching a skill, this practice is to be continued, no additional PPE is required.

Where people must be in shared space for more than 15 minutes they should maintain physical distancing and use surgical masks in line with general guidance on surgical mask use for the healthcare sector.

Facilitators

1. Select a venue/ classroom that can facilitate the anticipated number of learners with adequate distance between each learner and ensure that the number is as

- small as possible. Consider the level of Framework Level for Public Health Restrictions currently in effect and associated guidance on gatherings
- 2. Ensure that the room is ventilated as much as practical, taking account of comfort and security.
- 3. All persons are required to perform hand hygiene on entering and leaving the facility.
- 4. The facilitator needs to reiterate the importance of physical distancing, hand hygiene and cough etiquette at the commencement and during all sessions.
- 5. The facilitator needs to reiterate that if a learner becomes unwell during an education/ training session s/he must inform the facilitator immediately.
- 6. The facilitator should adhere to the guideline in section 6.6 if a learner reports that s/he has become unwell with suspect COVID-19 symptoms during the session.
- 7. Classroom session should commence on time to avoid congregation of learners.
- 8. The facilitator must maintain an attendance record with contact details of everyone present. The list should be maintained for a minimum period of 4 weeks for potential contact tracing purposes.
- 9. The facilitator may liaise with local catering department to manage and arrange breaks (including staggering these if necessary) to maintain physical distancing.
- 10. The facilitator cleans contact surfaces of all podiums, electronic equipment and devices as per HSE instructions on how to clean PC and desks using approved cleaning materials at start and end of each teaching session.

External Facilitator

External facilitators need to be briefed on the above by a member of the CNME team in advance of their teaching session.

Learners on arrival to the venue

 Learners should maintain current physical distancing recommendations on entering the classroom/ training venue and avoid any congregation at venue entrance. 2. Learners will be directed to undertake hand hygiene on entering classroom/training venue.

In the classroom/training room

- 1. Learners should bring their own essential personal items only and use these including pens to sign in. All items to remain within personal space where practical.
- 2. Learners will be directed to their learning space and should remain within this area in so far as practical unless directed by the facilitator.
- 3. Learners will be provided with frequent breaks during education/ training sessions. Where practical, consider staggered breaks and a sequenced process for exit of the room to avoid congregation at the exit. Generally, it will be appropriate for those seated nearest the exits to leave first and for others to follow in sequence. Current physical distancing recommendations should be maintained during break times. Where an outdoor space is available and weather permits, breaks may be taken outdoors.
- 4. If a learner becomes unwell during an education/ training session, they must inform the facilitator immediately and remove themselves to a suitable area outside the classroom/ training room and go home. If there is a delay in time to leave, the learner must go to a separate room. Thereafter, the advice is to self-isolate and contact their General Practitioner (GP) and their local Occupational Health Department without delay.
- 5. Local arrangement should be in place to manage cleaning after a possible COVID-19 case, refer to the cleaning and decontamination in the following guidance link:
- Acute Hospital Infection Prevention and Control Precautions for Possible or Confirmed COVID-19 in a Pandemic Setting

https://www.hpsc.ie/a-

<u>z/respiratory/coronavirus/novelcoronavirus/guidance/infectionpreventionandcon</u> <u>trolguidance/Infection%20Prevention%20and%20Control%20Precautions%20for</u> %20Acute%20Settings%20-%20COVID-19.pdf.

Monitoring and Evaluation

Each service area/ organisation implementing this *Guidance Document* must ensure robust governance and accountability processes for monitoring and evaluation is in place.

Appendix 1 – Group Membership

Membership of the group to develop version 1.0 of 'Guidance Document on Infection Prevention and Control Practices in Relation to Delivering Face to Face Education during the COVID-19 Pandemic'

Name:	Title	Representation
Marissa Butler (Chair)	Director, CNME Galway	ADCNME
Hazel Cazzini	Midwifery Specialist Coordinator, Centre for Midwifery Education, Dublin	ADCNME
Patricia Coughlan	tricia Coughlan ADON Infection Prevention and Control, Cork Kerry Community Healthcare	
Ann Gilmartin	Ann Gilmartin Leadership Advisor	
Ruth Hoban	Specialist Coordinator, CNME Mayo Roscommon	ADCNME
Fiona Hurley (Secretary)	Specialist Coordinator, CNME Limerick	ADCNME
Kathleen Leahy	QQI Coordinator, CNME Galway	ADCNME
Maura Loftus	Director, RCNME Tullamore	ADCNME
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Philippa McGavigan	Nurse Tutor, CNME Donegal	ADCNME
Carmel McGrath	Nurse Tutor, RCNME Tullamore	ADCNME
Mary McKenna	IPC Nursing Lead on National HSE-AMRIC Team	IPC
Mary McNamara	Mary McNamara Interim Director, CNME Kerry	
Mary O' Regan	Mary O' Regan Nurse Tutor, CNME Kerry	
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Sample Risk Assessment Form for Classroom

(Adapted from the HSE National Health and Safety Function (NHFS) Risk Assessment Document)

Example: Risk Assessment Prompt List for the Teaching Environment

Has the requirement for face-to-face teaching been assessed and identified as necessary?

Yes /No? If yes, please consider the following:

	Hazard controls to be considered	YES	NO	Comments/
				Outcome
1.	Is there a cleaning schedule that allows cleaning			
	of rooms used at least twice daily if in use?			
	i.e. prior to and immediately after each session			
	if more than one session with different learners			
	is taking place or at the end of the day			
2.	Are there appropriate supplies of hand washing			
	facilities/ gel/ tissues and appropriate bins?			
3.	Are the rooms adequately ventilated?			
	Can a window and a door remain open?			
4.	Are there posters and signage prominently in			
	place reminding participants and staff of			
	physical distancing and other measures to			
	prevent transmission?			
	i.e. hand washing/respiratory etiquette			
5.	Are breaks staggered with other groups to avoid			
	gathering of groups where social distancing may			
	be breached?			
6.	Can the teaching environment/ classroom			
	accommodate current physical distancing			
	requirements for the entire class?			
	Yes/no			
	If no, i.e. skills demonstration/ scenarios are			
	measures in place to limit transmission such as;			
	-where physical distancing can't be maintained			
	are surgical face masks available?			
7.	Is equipment that will be used for teaching			
	cleaned appropriately in line with			
	manufacturer's recommendations prior to and			
	at the end of each class?			
	i.e. manikins, limbs, defib. machine			
8.	Are arrangements in place to clean and disinfect			
	the venue in the event of an attendee becoming			
	unwell with symptoms of a respiratory illness as			
	per HPSC guidance?			

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