

Returning Students to Clinical Experiences Safely

Academic and hospital nursing leaders in Maryland created the following set of guidelines to support the re-entry of nursing students in clinical settings. This document shares resources and suggested practices. When developing these guidelines, nursing leaders considered:

- the safety of nursing students, faculty, hospital staff, and patients,
- the rapidly changing COVID-19 pandemic including potential for sudden outbreaks, and
- collaborative partnerships between academic pre-licensure programs and healthcare organizations.

The accompanying guidelines are intended to be used as a resource by nursing leaders in academia and healthcare organizations. We recognize institutional policies vary. Therefore, the implementation of these guidelines will also vary.

This is not a legal document. We recommend organizations work with their legal departments to individualize the guidelines.

Clinical Experience and PPE Requirements

A fluid phased-in approach is required to facilitate the re-entry of nursing students in clinical settings during the COVID-19 pandemic. The bulleted strategies are designed to safeguard students and conserve and optimize supplies of N-95 respirators for frontline staff. Preserving supplies of N-95 respirators is a priority for hospitals, as these can become quickly depleted during a sudden outbreak.

- Nursing students are not to be assigned by hospital staff or faculty to patients who have tested positive for COVID-19.
- Students and faculty are required to wear a face mask and shield at all times. Accommodations for the wearing of a mask and shield will be made per the American with Disabilities Act (ADA).
- Faculty and students must bring and maintain PPE and must comply with the CDC guidelines for mask-wearing. CDC guidelines are at <https://www.cdc.gov/coronavirus/2019-ncov/hcp/using-ppe.html>.
- Masks must cover the nose and mouth and not be worn halfway or altered for comfort. For example, changing the ear loops or breaking the integrity of the seal. Refer to Appendix A for pictures demonstrating **inappropriate** wearing of masks.

- The provision of PPE is a mutually shared responsibility between the nursing programs and hospitals. Faculty and hospital nursing leaders must work together to provide face masks and shields to students. Quick, continuous, and open communication and flexibility between the partners is required to make this a safe and efficient process.
- Faculty must check with the hospital leaders about the availability of face masks and shields or requirements for students to bring their own. Hospital leaders will immediately inform faculty about changes in the availability of PPE for students.
- Hospitals will reserve N-95 respirators for the frontline staff caring for COVID-19 patients and performing aerosol-generating procedures (AGPs). If a hospital elects to provide N95 respirators to students, the faculty at the nursing program and hospital nursing leaders will jointly develop processes to fit test students.
- Nursing leaders acknowledge students will be unable to perform AGPs unless they have an N-95 respirator. Temporary teaching methods for learning these procedures are simulation or observation of a nurse performing an AGP from a safe distance.

Student Screening Procedures for Symptoms of COVID-19

- Academic partners will assume full responsibility for assessing, confirming, and documenting each student's fitness-for-duty before the student goes to the clinical site.
- Students and faculty are required to answer a series of Centers for Disease Control (CDC) standardized questions, and they must be open to a temperature check or other COVID-19 related screening procedures before starting each day of clinical (Appendix B).
- Academic and hospital partners must work together to identify information flow procedures for student screening, confirmation, and documentation procedures. We acknowledge that the logistics for academicians to turn around this information quickly are challenging, especially for students in a precepted relationship. As with other processes, these are fluid. Flexibility is asked of all entities.

Pre- & Post-Conference Requirements

- Compliance with all healthcare facility regulations and rules for physical distancing and masking is mandatory. Consistent violations may result in facilities barring students, faculty, or nursing programs from clinical experiences.
- ALL pre- and post-conferences with students will take place outside of the healthcare organization. Students and faculty are not to congregate in any conference, break, or other meeting room.



- Students must always maintain social distancing. For example, riding elevators, and during breaks, and lunch/dinner.

Education

- Academicians and hospital leaders agreed to standardize the educational requirements for students and adopted the University of Maryland Medical System (UMMS) COVID-19 training modules. UMMS educational materials meet CDC requirements. Standardization of student education ensures consistency and reduces redundancy in learning. Healthcare organizations may require additional education and training.
- Students must complete the above mandatory COVID-19 education before starting clinical experiences at healthcare organizations.
- Hospitals use different types of PPE. Therefore, each hospital must demonstrate to the students how to don and doff their hospital-specific PPE equipment if it differs from that shown in the UMMS training.
- UMMS COVID-19 training modules and attestation can be uploaded into Castlebranch for all SONs to access/use as universal education for students.
- Nursing programs must work with Castlebranch within their contracts to use the modules.
- **UMMS grants permission for the exclusive use of the COVID-19 training modules to Maryland nursing programs only. Dissemination of COVID-19 training modules by nursing programs to nursing programs or other institutions is prohibited. No rights are granted to Castlebranch for use or distribution.**

Attestations

We recommend nursing programs require the following attestations from students:

- Confirmation of the completion of mandatory COVID-19 education before caring for patients
- Confirmation of the truth and accuracy of responses to COVID-19 screening questions
- Acknowledgment of risk of disease while working in clinical settings

Appendix A

Mask Wearing Mistakes



Wearing a mask with
your nose out



Wearing a mask on your
mouth and a second mask
covering your neck



Mask hangs off one ear



Wearing a surgical and
paper mask together



Appendix B

COVID-19 Screening Questions

Below are the primary COVID-19 screening questions recommended by the Centers for Disease Control. Nursing programs and healthcare organizations may require students and faculty to answer additional screening questions.

1. Do you have any of these symptoms that you cannot attribute to another condition (yes, no)?
 - Fever or chills
 - Cough
 - Shortness of breath or difficulty breathing
 - Fatigue
 - Muscle or body aches
 - Headache
 - New loss of taste or smell
 - Sore throat
 - Congestion or runny nose
 - Nausea or vomiting
 - Diarrhea

2. Have you had contact with anyone that you know has been diagnosed with COVID-19 (yes; no)? *Contact is defined as being within 6 feet (2 meters) for more than 15 minutes with a person, or having direct contact with infectious fluids from a person with confirmed COVID-19 (for example being coughed or sneezed on).*