Student Practice Education Guideline: Prevention, Screening and Monitoring of Communicable Diseases

August 2024
INTRODUCTION

This student practice education guideline outlines current requirements and guidance for communicable diseases including:

- Prevention,
- Immunization
- Screening
- Outbreak Management
  - Monitoring
  - Reporting
- Public Health Emergencies

Specific guidelines related to screening, immunization and student practice considerations for tuberculosis (TB) and Viral Respiratory Illness are included at the end of this document.

The recommendations for communicable disease prevention and reporting, immunizations and infection control are informed by:

- The BC Centre for Disease Control: Communicable disease control manual and BC Immunization Manual
  - Part 1 Immunization Schedules.pdf (bccdc.ca)
  - BC Immunization Manual – Part 2 – Immunization of Special Populations, Health Care Workers
- The Provincial Health Officer (PHO): Orders relevant to immunization of health care workers.
- The Provincial Infection Control Network of British Columbia and the Ministry of Health Provincial Guidance on Return to Work and Exposure Management for Health Care Workers with Viral Respiratory Illness.

This document replaces two previous practice education guidelines:

- Practice Education Guideline: Communicable Disease Outbreaks
- Practice Education Guideline: Communicable Disease Prevention

OBJECTIVES

- Provide resources for Health Care Organizations (HCO), Post-Secondary Institutions (PSI), staff, faculty and PSI educators to protect patients, staff, faculty, students, and others from communicable diseases.
- Outline the roles and responsibilities of HCO, PSI, students and others for communicable disease prevention, immunization and outbreak management when in a HCO setting.
- Enable faculty and students to employ best practices to minimize the risk of infection transmission based on national and provincial mandates.
- Identify vaccination requirements for students and PSI educators in practice education settings.
• Identify the expectations for obtaining and reporting vaccination and immunity status for students and PSI educators in practice education settings.
• Outline TB testing and reporting requirements for PSI Students and Educators in practice education settings.
• Outline return-to-practice guidelines and management of exposures for communicable diseases.
• Outline actions required by HCO and PSI for outbreak and public health emergencies.

AUDIENCE
The guidance provided in this document applies to
• Health Care Organizations engaged in student education.
• All Post-Secondary Personnel responsible for student practice education.
• All Students and Educators participating in practice education within a health care setting.

SCOPE
This guideline provides recommendations for infection prevention and control, monitoring and outbreak management of communicable diseases for the practice education setting.

For the risks related to blood-borne disease, refer to Practice Education Guideline: Injury and Exposure during Practice Education Experience.

For detailed information regarding respiratory protection including N95 respirator fitting, refer to Practice Education Guideline: Respiratory Protection.

For the Provincial Health Officer Orders, Notice and Guidance, refer to the Office of the Provincial Health Officer page.

HOW TO USE THIS DOCUMENT
The guidelines provided in this document will provide Health Care Organizations, Post-Secondary Institutions and Students with a structured, methodological approach for successful implementation and execution of practice education experiences with respect to communicable disease prevention, screening and management.

This document is organized into three major sections:
1. Prevention – to include infection control and immunization
2. Screening
3. Monitoring and Outbreak Management

Each major section includes specific roles and responsibilities of the HCO, PSI and Student. Some sections include this icon which outlines specific criteria related to the practice education guideline and provides further clarification for HCOs, PSIs and Students.
Section 1: PREVENTION

1:1 Infection Prevention and Control

Infection prevention and control (IPC) is a practical, evidence-based approach preventing patients and health workers from being harmed by avoidable infections. Effective IPC requires constant action at all levels of the health system, including policymakers, facility managers, health workers and those who access health services. IPC is unique in the field of patient safety and quality of care, as it is universally relevant to every health worker and patient, at every health care interaction. PSI educators and students will have unique reporting requirements in alignment with PSI and HCO guidelines.

Topics

- Hand Hygiene
- Respiratory Hygiene
- Personal Protective Equipment
- Respiratory Protection ([Existing PEG for respiratory protection](#))
### Roles and Responsibilities: Infection Prevention and Control

#### Role of Health Care Organization (HCO)
- Maintain Policies, Guidelines and Procedures related to Infection Prevention and Control in alignment with Medical Health Officer Orders and other Provincial Mandates.
- Implement control measures in place to eliminate or, if that is not possible, minimize the risk of exposure to airborne contaminants and airborne or droplet transmission of disease in the practice education setting such as an occupational health and safety program and infection prevention and control practices and precautions.
- Provision of supplies to ensure adequate supply of PPE available including respiratory protection (various sizes and models).

#### Role of Post-Secondary Institution (PSI)
- Provide students with academic and simulation opportunities to practice and achieve competence in infection prevention and control including point of care risk assessments, additional precautions, hand hygiene, respiratory hygiene and PPE donning and doffing.
- Ensure students have fit testing for respiratory protection completed before commencing practice education facility. Refer to: Practice Education Guideline: Respiratory Protection
- Ensure educators and students refrain from working when ill with symptoms that are likely attributable to a communicable disease.

#### Role of Student
- Perform point of care risk assessments as warranted in the practice education setting.
- Adhere to Academic Institution and Health Care Organization directives and guidelines.
- Refrain from working when ill with symptoms that are likely attributable to a communicable disease.
- Use appropriate and properly fitted air purifying respirators according to WorkSafeBC Occupational Health & Safety Regulations if conducting tasks or activities that could reasonably be anticipated to result in exposure to airborne contaminants during the course of the practice education experience are expected.

### Further Information
1. Infection, Prevention and Control (IPC)
   - [BCCDC Infection Control](#) – Guidance and resources for health care settings.
2. Personal Protective Equipment (PPE)
   - [BCCDC Personal Protective Equipment](#)
1:2 Cleaning, Disinfecting and Sterilization

Cleaning, disinfection and sterilization are the backbone of infection prevention and control in hospitals and other health care facilities. The type and level of decontamination depends on the nature of the device and the use to be given to it.

Topics

- Cleaning and disinfection of high touch surfaces, patient care areas and electronic devices

Roles and Responsibilities: Cleaning, Disinfecting and Sterilization

<table>
<thead>
<tr>
<th>Role of Health Care Organization (HCO)</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Maintain Policies, Guidelines and Procedures related to environmental cleaning and disinfecting in patient care settings.</td>
</tr>
<tr>
<td>• Provide necessary supplies to ensure adequate cleaning and disinfecting possible.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Role of Post-Secondary Institution (PSI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Provide students with academic and simulation opportunities to practice and achieve competence in routine infection control and additional precautions before entering the practice education experience.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Role of Student</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Complete SPECO courses: Waste Management Basics and WHMIS Provincial Course</td>
</tr>
<tr>
<td>• Adhere to Academic Institution and Health Care Organization directives and guidelines</td>
</tr>
<tr>
<td>• Use appropriate and properly fitted air purifying respirators according to WorkSafeBC Occupational Health &amp; Safety Regulations if conducting tasks or activities that could reasonably be anticipated to result in exposure to airborne contaminants during the course of the practice education experience are expected.</td>
</tr>
</tbody>
</table>
1:3 Immunizations

“Immunization is a proven public health measure that helps control and eliminate serious and life-threatening infectious diseases.” Immunization protects both individuals and the larger population by preventing the spread of infections. Achieving and maintaining a high level of immunization coverage in a population is important in helping to provide the best protection against vaccine-preventable diseases. ¹

Topics

- Immunizations recommended for health care workers
- Record keeping and reporting
- Confidentiality

Immunization Guidelines

“Health workers are the backbone of any functioning and resilient health-care system. Without health workers, health services simply cannot be delivered: health workers heal and care for people, ease pain and suffering, prevent disease and mitigate risk.

Health workers as a group are at greater risk of exposure to some communicable diseases than the general population because of their contact with patients or infective material in their working environment. There is also a risk that infected health workers could contribute to nosocomial transmission of disease to vulnerable patients at higher risk for severe illness, complications and death. Protection of health workers through vaccination is therefore an important part of patient safety and infection prevention and control programmes in health-care settings, as well as a cornerstone of occupational health and safety.”²

- Follow the immunization guidance for Health Care Workers as outlined in the BC Centre for Disease Control (BCCDC) Communicable Disease Control Manual on Immunization:
  - HealthCareWorkers.pdf (bccdc.ca)

Further Information

1. Specific information about immunization schedules, testing and follow-up:
   - The BC Centre for Disease Control: Recommended immunizations for health care workers
   - Immune Status Reporting for Health Care Workers in BC
   - Vaccination Status Reporting: https://immunizations.healthcarebc.ca
Roles and Responsibilities: Immunizations

Role of Health Care Organization (HCO)

- Communicate recommendations for screening and vaccinations for PSI students and educators based on recommended schedule for routine and recommended immunizations for special populations.
- Establish policies, standards, guidelines and protocols to minimize the risks of communicable disease exposures.

Role of Post-Secondary Institution (PSI)

- Communicate screening and immunization requirements to students.
- Provide students with academic and simulation opportunities to practice and achieve competence in infection prevention and control including point of care risk assessments, and additional precautions.
- Provide documentation requirements for screening and immunization.
- Communicate consequences and risks to learners and others including impact to practice education experiences if guidelines not followed.
- Maintain confidential records of student and PSI educators’ vaccine and immunity status.
- Indicate if placement requirements are met in HSPnet.
- Comply with privacy legislation for any release of immunization or screening information.

Role of Student

- Adhere to guidance for required and recommended vaccinations for health care workers.
- Report vaccine and immunity status.
- Follow infection prevention and control precautions.
- Report exposures to PSI and educational institutions.
Section 2: SCREENING

Screening is one of the controls that can help reduce the likelihood of a pathogen entering and spreading in the workplace.

Topics

- Communication strategies
- Tuberculosis Screening (Also refer to Appendix 1: Tuberculosis)
- Self-Screening for Respiratory Illnesses

Roles and Responsibilities: Screening

**Role of Health Care Organization**

- Communicate recommendations for screening for PSI students educators based on recommended schedule for routine and recommended screening for special populations.
- Establish policies, standards, guidelines and protocols related to screening to minimize the risks of communicable disease exposures.
- Communicate to PSI’s changes in Medical Health Officer (MHO) orders or directives for screening initiatives.

**Role of Post-Secondary Institution**

- Ensure participation and compliance of learners to screening practices.
- Follow and communicate guidance on TB screening.
- Provide students with academic and simulation opportunities to practice and achieve competence in routine infection control and additional precautions before entering the practice education experience.
- Provide students with documentation requirements for screening and immunization.
- Communicate consequences and risks to learners and others including impact to practice education experiences if guidelines not followed.
- Maintain records of learners screening, testing and self-assessments (where appropriate).
- Maintain confidentiality of student records.

**Role of Student**

- Engage in self-screening when appropriate and provide relevant documentation or evidence when needed.
- Participate in formal screening programs when required for practice education.
- Follow guidance on TB screening.
- Follow Health Care Organization protocols when self-screening determines possible exposure or infection from communicable disease.
- Follow Health Care Organization protocols for reporting suspected or known exposure to communicable disease.

Further Information:

1. [Communicable Disease Prevention – Worksafe BC](#)
2. [CCOHS: Respiratory Infectious Disease Screening](#)
Section 3: MONITORING AND OUTBREAK MANAGEMENT

Outbreak Management is required to identify and interrupt transmission of microorganisms. An Outbreak is the occurrence of more cases of a particular infection than is normally expected. Outbreak Management is a part of the overall risk management strategy of a facility, which involves developing a contingency plan to be implemented in the event of an outbreak. The Medical Health Officer will declare an outbreak based on the particular communicable disease, epidemiology, and setting.
Roles and Responsibilities: Monitoring and Outbreak Management of Communicable Diseases

**Role of Health Care Organization**
- Establish policies and procedure for identifying and responding to communicable disease outbreaks that involve practice education experiences.
- Communicate outbreak protocols to the post-secondary institutions.
- Track communicable disease outbreaks, identify trends and share relevant information with post-secondary institutions.
- Work with the PSI Practice Education Coordinator (or designate) to determine the best approach to fulfilling the commitment for the practice education experience.
- Supply PPE including respiratory protection (various sizes and models).

**Role of Post-Secondary Institution**
- Provide students with academic and simulation opportunities to practice and achieve competence in routine infection control and additional precautions before entering the practice education experience.
- Work with health care organization practice education coordinator, manager or delegate to best mitigate instances in the event of an outbreak that can include suspension, delay, extension or even change of practice education location.
- Cancel or significantly modify, only when necessary, practice education experiences or program cohorts after all other possible alternatives have been explored and discussed with Ministry of Post-Secondary Education and Future Skills representatives and post-secondary education partners.

**Role of Student**
- Ensure completion of pre-requisites and orientation requirements.
- Adhere to infection control guidelines and standards outlined by the practice education setting to minimize the risk of exposure and transmission of infectious and communicable diseases.
- Follow additional precautions when indicated.
- Refrain from moving or crossing from affected to unaffected areas and vice versa.
- Follow health care organization and post-secondary protocols for reporting suspected or known exposure to an infectious or communicable disease.
- Follow processes and guidelines for communicating changes in the ability to complete the practice education experience.
- Follow processes and guidelines if experiencing any signs and symptoms of an infectious or communicable disease.
Communicable Disease Outbreak (Vaccine Preventable and Non-Vaccine Preventable)

The HCO may allow practice education to continue during an outbreak upon confirmation by the MHO. The HCO Medical Health Officer/Infection Prevention and Control Practitioner (as part of declaring an outbreak, determining the duration of control measures, and declaring the outbreak over) determines the conditions with which to allow or limit Students and/or Educators to enter the affected area. Such conditions may include whether the students/educators:

- Are vaccinated against the communicable disease, where a vaccine exists.
- Were in the location just before and during the initial outbreak, therefore possibly already exposed and not ill.
- Limit the planned practice education experience to the outbreak area only.
- Are educated in and able to perform required IPC as well as additional precautions as determined by the HCO and PSI.

Vaccine Preventable Disease Outbreak:

If a student or on-site educator is unvaccinated or cannot provide proof of vaccination or immunity as applicable, they may be excluded from practice education setting until:

- They can present proof of vaccination or immunity.
- The period of communicability has passed.
- The outbreak is declared over by HCO or MHO.
- The HCO Medical Health Officer determines a specific period of time after the student or educator choose to be vaccinated.

The HCO and PSI may find an alternate and appropriate practice placement in an unaffected setting within the HCO so as to promote the continuity of the practice education experience while protecting all involved. The HCO may limit practice education to one site/department if multiples sites are used.
PUBLIC HEALTH EMERGENCY INVOLVING A COMMUNICABLE DISEASE

If a public health emergency involving a communicable disease is declared, HCO’s and PSI’s have a responsibility to ensure everyone’s safety. In the event of a public health emergency involving a communicable disease, the HCO will connect with the PSI and determine a plan for practice education.

Roles and Responsibilities: Public Health Emergency Involving Communicable Disease

**Role of Health Care Organization**

- Follow provincial as well as any orders, notices, or guidance issued by the Provincial Health Officer.
- Assess the care and learning environment and decide to suspend, delay, or modify current and/or future practice education experiences from the original request in liaison with the PSI.
- Consult with the HCO Medical Health Officer when significant delays or impacts to learning are anticipated in liaison with the PSI.
- Cancel or significantly modify, only when necessary, practice education experiences or program cohorts after all other possible alternatives have been explored and discussed with Ministry of Post-Secondary Education and Future Skills representatives and post-secondary education partners.

**Role of Post-Secondary Institution**

- Assess the care and learning environment and decide to suspend, delay, or modify current and/or future practice education experiences from the original request.
- Follow provincial as well as any orders, notices, or guidance issued by the Provincial Health Officer.
- Consult with the HCO Medical Health Officer when significant delays or impacts to learning are anticipated in liaison with the PSI.
- Cancel or significantly modify, only when necessary, practice education experiences or program cohorts after all other possible alternatives have been explored and discussed with Ministry of Post-Secondary Education and Future Skills representatives, health care organization partners and post-secondary institutions.
- Ensure educators and students follow HCO Medical Health Officer or designate orders for return to practice requirements in the event an Educator or student becomes symptomatic with an infectious or communicable disease.

**Role of Student**

- Ensure completion of pre-requisites and orientation requirements
- Adhere to infection control guidelines and standards outlined by the practice education setting.
- Take reasonable steps to minimize the risk of exposure to and transmission of infectious and communicable diseases.
- Follow additional precautions when indicated.
- Follow orders, mandates and guidelines set out by the MHO, HCO and PSI.
- Follow HCO Medical Health Officer or designate orders for return to practice requirements in the event the student becomes symptomatic with an infectious or communicable disease.
**Appendix 1: Tuberculosis Guideline**

**SCREENING**

Students engaged in practice education should follow screening guidelines for Health Care workers from the BCCDC Provincial TB Services:

<table>
<thead>
<tr>
<th>Scenario</th>
<th>Timeframe for TB Screening</th>
<th>Two-Step Tuberculosis Skin Test (TST)</th>
<th>Plan if:</th>
<th>TST positive and/or TB symptoms</th>
</tr>
</thead>
</table>
| Student in health care setting. †             | Upon hire or pre-requisite for volunteering or program admission or first practice experience. | Yes, if appropriate*                  | Provide TB clearance and documentation to the client. | Refer to TBS
|                                               |                            |                                      |            |                                |
|                                               |                            |                                      |            | • CXRΩ required                  |
|                                               |                            |                                      |            | • Sputum required if symptomatic. |

* A two-step TST at baseline is recommended if no prior TST or previous TB treatment.
♦ If recent exposure was less than 8 weeks ago refer to BCCDC TB Manual, Section 4.0(b) Table 11 for further TB screening guidance.
† Recommendations based on review of local epidemiology in BC health care facilities (19).
Ω May vary based on jurisdiction, please refer to the BCCBDC TB Manual, page 2.
* The health care provider that reads the TST is responsible for the referral to TBS.

**Subsequent Annual Testing**

Determination of annual TSTs is made by respective health authorities.

**EXPOSURE AND MONITORING**

Prioritization of contacts exposed within hospitals and other congregate facilities should be determined on a case-by-case basis, in consultation with infection control representatives within the involved facility. Consider consultation with TB Services and/or a case conference to assist in planning. ³

Refer to the BCCDC Tuberculosis Manual for in-depth exposure and monitoring procedures.

**Immunization**

The Bacille Calmette-Guerin (BCG) vaccine is not routinely available in Canada. In BC, Provincial TB Services works to reduce the impact of TB through health promotion, disease prevention and TB treatment and follow up.
Appendix 2: Viral Respiratory Illness (IPC) Guidelines

Health Care Organizations and Post-Secondary Institutions continue to work together to support student practice education during periods where respiratory diseases, such as, influenza, pneumonia, parainfluenza virus, respiratory syncytial virus (RSV), coronavirus, rhinovirus, human metapneumovirus and adenovirus, are prevalent in the practice education setting. Continuous monitoring of outbreaks and changes to Medical Health Officer Orders require evolving approaches to reduce the spread of infection.
# Roles and Responsibilities: Viral Respiratory Illness (IPC)

## Role of Health Care Organization

- Respond and Implement Provincial Health Officer Orders.
- Communicate any site/program specific guidance related to viral respiratory illnesses prior to the start of the student practice education placement.
- Communicate outbreak protocols to the post-secondary institutions.
- Track outbreaks, identify trends and share relevant information with post-secondary institutions.
- Communicate to PSI policy changes regarding PPE use and requirements.
- Supply PPE including respiratory protection (various sizes and models).
- Provide guidance to PSI’s and Learners for return to practice education following exposure/infection.
- The HCO/PSI may adjust the care area or patient assignment to best match the learning objectives; promote patient/staff/student safety.

## Role of Post-Secondary Institution

- Communicate Viral Respiratory Illness (IPC) specific orders and policies to students.
- Communicate Provincial Health Officer Orders related to specific respiratory viruses and ensure student compliance before entering practice environment.
- Provide students with academic and simulation opportunities to practice and achieve competence in routine infection control and additional precautions before entering the practice education experience.
- Ensure educators and students follow HCO Medical Health Officer or designate orders for return to practice requirements in the event an Educator or student becomes symptomatic with an infectious or communicable disease.
- Work with the HCO to adjust the care area or patient assignment to best match the learning objectives; promote patient/staff/student safety.
- Cancel or significantly modify, only if necessary, practice education experiences or program cohorts after all other possible alternatives have been explored and discussed with Ministry of Post-Secondary Education and Future Skills representatives and health care organization partners.

## Role of Student

- Adhere to Provincial Health Officer Orders.
- Adhere to infection control guidelines and standards outlined by the practice education setting.
- Take reasonable steps to minimize the risk of exposure to and transmission of infectious and communicable diseases.
- Follow additional precautions when indicated.
- Follow guidance regarding the use of medical masks while in healthcare facilities.
- Perform point of care risk assessments before patient interactions.
- Comply with additional requirements for self-assessment. (Viral Respiratory Illness Checklist for Health-care Worker)
- Follow processes and guidelines if experiencing any signs and symptoms of an infectious or communicable disease.
- Provide care to presumptive-positive patients or patients with confirmed viral respiratory illness, when the required competencies, supervision and IPC practices are in place.
## Appendix 3: Student Checklist

**Student Checklist: Communicable Disease Prevention, Screening, Monitoring and Exposure Management**

<table>
<thead>
<tr>
<th>Task</th>
<th>Resource</th>
</tr>
</thead>
<tbody>
<tr>
<td>Complete Student Practice Education Core Orientation</td>
<td>SPECO (curriculum) - LearningHub (phsa.ca)</td>
</tr>
<tr>
<td>Review site guidelines for infection control, mask requirements.</td>
<td>Refer to Health Care Organization Policies</td>
</tr>
<tr>
<td>Report Immunization and TB Screening in accordance with the requirements for Immune Status Reporting for health-care workers</td>
<td></td>
</tr>
<tr>
<td>Complete N95 fit testing and ensure certificate is readily available</td>
<td></td>
</tr>
<tr>
<td>Definitions</td>
<td>Description</td>
</tr>
<tr>
<td>-----------------------------------</td>
<td>-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td><strong>Additional Precautions</strong></td>
<td>&quot;Extra measures, when routine practices alone may not interrupt transmission of an infectious agent. They are used in addition to routine practices (not in place of), and are initiated both on condition/clinical presentation (syndrome) and on specific etiology (diagnosis).&quot;¹ Examples of additional precautions: contact precautions, droplet precautions, airborne precautions.</td>
</tr>
<tr>
<td><strong>Air Purifying Respirators</strong></td>
<td>&quot;Respirators are designed to help reduce the wearer's respiratory exposure to airborne contaminants such as particles, gases, or vapours. Respirators and filters must be selected based on the hazards present. They come in various sizes and styles, and should be individually selected to fit the wearer's face and to provide a tight seal. A proper seal between the user's face and the respirator forces inhaled air to be pulled through the respirator's filter material, thereby providing protection.&quot;⁴</td>
</tr>
<tr>
<td><strong>Communicable disease</strong></td>
<td>&quot;Communicable, or infectious diseases, are caused by microorganisms such as bacteria, viruses, parasites and fungi that can be spread, directly or indirectly, from one person to another. Some are transmitted through bites from insects while others are caused by ingesting contaminated food or water.&quot;⁵</td>
</tr>
<tr>
<td><strong>Exposure</strong></td>
<td>Direct or indirect contact with a person who has an unknown, suspected, or known infection with a communicable disease. Can occur through (but not limited to) percutaneous, permucosal, dermal, respiratory, or digestive route ³ &quot;The condition of being subject to an infectious disease through contact with an infected person or a contaminated environment&quot;⁴ (e.g. inanimate-animate object or particles in the air).³</td>
</tr>
<tr>
<td><strong>Health Care Organization (HCO)</strong></td>
<td>A health service delivery agency where practice education experience occurs. Includes healthcare facilities, agencies, and any community settings where HCO Workers provide care or service.</td>
</tr>
<tr>
<td><strong>Immunization</strong></td>
<td>When a person is made immune or resistant to an infectious disease, typically through administering a vaccine. Vaccines stimulate the body's own immune system to protect the person against subsequent infection or disease. (Adapted from the World Health Organization)⁶</td>
</tr>
<tr>
<td><strong>Outbreak</strong></td>
<td>&quot;...the occurrence of disease cases in excess of normal expectancy. The number of cases varies according to the disease-causing agent, and the size and type of previous and existing exposure to the agent.&quot;⁷</td>
</tr>
<tr>
<td><strong>Personal Protective Equipment</strong></td>
<td>PPE is specialized equipment or clothing such as eye protection, gloves, medical masks, gowns and respirators worn for protection against exposure to infectious microorganisms and from workplace hazard.⁸</td>
</tr>
<tr>
<td><strong>Point of Care Risk Assessment (PCRA)</strong></td>
<td>IPAC definition: activity that is conducted by staff before each Patient interaction to assess the infectious risks posed by a patient, situation, or procedure to themselves, other staff, other patients and visitors. THE PCRA is based on professional judgement about the clinical situation, as well as up to date information on how the specific health-care facility has designed and implemented appropriate physical (engineering) and administrative controls and the use and availability of PPE⁴.</td>
</tr>
<tr>
<td><strong>Post-Secondary Institution (PSI)</strong></td>
<td>Academic / training institution, public or private, offering post-secondary education programs</td>
</tr>
<tr>
<td>Term</td>
<td>Definition</td>
</tr>
<tr>
<td>-------------------------------------</td>
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<tr>
<td>PSI Educator</td>
<td>Faculty, instructors, course leader, and other terms for educators employed by the Post-Secondary Institution. Individual might also be an employee of the HCO. While in the practice education setting, the PSI Educator represents and acts on behalf of the PSI.</td>
</tr>
<tr>
<td>Public Health Emergency</td>
<td>A current or impending situation that constitutes a danger of major proportions with the potential to result in serious harm to the health of the public. They are usually caused by forces of nature, a disease or other health risk, an accident or an act whether intentional or otherwise.</td>
</tr>
<tr>
<td>Risk, Level of (related to exposure)</td>
<td>&quot;Low risk ... workers who rarely come into contact with potentially infected people or materials. Moderate risk ... workers who rarely come into contact with infected people, but who may work in areas where infected people have been, or who handle potentially contaminated items (indirect contact). High risk ... workers who work directly with people who are or may be infected.&quot;</td>
</tr>
<tr>
<td>Routine practices</td>
<td>&quot;A comprehensive set of infection prevention and control measures that have been developed for use in the routine care of all patients at all times in all healthcare settings. Routine practices aim to minimize or prevent healthcare-associated infections in all individuals in the healthcare setting, including patients, healthcare workers, other staff, visitors and contractors.&quot; Examples of routine practices: education, hand hygiene, sharps safety, personal protective equipment, routine cleaning, safe handling of food.</td>
</tr>
<tr>
<td>Student/PSI Student</td>
<td>Registered and in good standing in a course or program of studies within a PSI or HCO, and selected to take part in organized practice education experience. Other terms: student intern, trainee, apprentice, preceptee, mentee</td>
</tr>
<tr>
<td>Transmission</td>
<td>&quot;The process whereby an infectious agent passes from a source and causes infection in a susceptible host.&quot;</td>
</tr>
<tr>
<td>Vaccine-Preventable Disease</td>
<td>“Vaccine preventable diseases (VPDs) are infectious diseases caused by viruses or bacteria that can be prevented with vaccines.”</td>
</tr>
</tbody>
</table>
References


### Document Review and Revisions

<table>
<thead>
<tr>
<th>Effective Date:</th>
<th>12/11/23</th>
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<tr>
<td>First Released:</td>
<td>12/08/23</td>
</tr>
<tr>
<td>Last Revised:</td>
<td>07/31/24</td>
</tr>
<tr>
<td>Last Reviewed:</td>
<td>07/30/24</td>
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**Approved By:** Provincial Student Practice Education Coordinating Committee (PSPECC)

**Owner:** PHSA

<table>
<thead>
<tr>
<th>Revision History</th>
<th>Version</th>
<th>Date</th>
<th>Description/Key Changes</th>
<th>Revised by</th>
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<tr>
<td></td>
<td>1.0</td>
<td>09/12/2023</td>
<td>Structural changes to incorporate revisions to communicable disease guidance.</td>
<td>CD</td>
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<tr>
<td></td>
<td>2.0</td>
<td>09/20/2023</td>
<td>Initial review by BCCDC Senior Practice Leaders for TB Services, Immunizations and Health Response</td>
<td>MA</td>
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</table>
|                  | 3.0     | 10/23/2023 | Full revision and update of content based on feedback from:  
1. BCCDC – Senior Practice Leaders (Health Response and TB Services)  
2. PHSA Occupational Health Nurse and Lead Occupational Health Nurse (Safety and Prevention)  
3. Langara College – Assistant Chair, Placements, Faculty of Nursing | MA         |
|                  | 4.0     | 10/30/2023 | Full revision and update of content based on feedback from:  
1. JIBC – Manager, Practice Education  
2. VCH – Manager, Regional Clinical Education, Allied Health  
3. UBC – Senior Advisor, Health and Safety, Faculty of Medicine and Practice Education Manager  
4. IPAC – Practice Leader | MA         |
|   |   | 5. Ministry of Post-Secondary Education and Future Skills  
6. Ministry of Health  
   a. Nursing Policy Secretariat  
   b. Allied Health Secretariat  
   c. Population and Public Health |
|---|---|---|
| 5.0 | 08/01/2024 | Revisions to align with [PHO COVID-19 Emergency Order (Rescinded)](https://www.bccdc.ca/health-info/prevention-public-health/immunization-vaccines)  
Reviewed by BCCDC Immunization Program |

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