

GUIDELINES FOR EDUCATIONAL ACTIVITIES: SPACE REQUIREMENTS & USE OF MASKS IN HOSPITALS

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PURPOSE

The following guidelines are designed to support Supervisors and Learners in the Toronto Region Hospitals deliver educational activities safely in during the COVID-19 pandemic. These guidelines are intended to **compliment to Hospital-specific policies applicable to all Physicians, Staff, Learners and Visitors. Supervisors and Learners should adhere to standards and/or policies defined by their local Hospital.**

BACKGROUND

Following the guidance of the Toronto Region COVID-19 Hospital Operations Table, Hospitals are implementing universal masking policies, where masks are worn continuously by individuals while in public areas or on clinical units. Universal masking has been shown to significantly reduce exposure to COVID-19 by ensuring appropriate respiratory protection is in place.

Additionally, as of July 7, 2020, the City of Toronto requires that masks be worn within indoor public spaces, with some exemptions (children under the age of 2 and those with medical conditions).

Learners are gradually being reintegrated into Hospital activities through academic placements. As members of the care team, Supervisors and Learners should be aware of recommended interventions to reduce transmission of COVID-19, specifically Hospital mask policies and physical distancing.

MASKS

The following highlight education-specific guidelines. It is recommended that Supervisors and Learners are provided with full Hospital policies on masking to ensure broad understanding of mask-related requirements within their local context (e.g., mask distribution, discarding of masks, etc.).

1. Masks will be provided to all learners, as needed. Masks should be discarded when moist, contaminated, directly contacted by a patient, difficult to breathe through, or damaged in any way.
2. For clinical Learners performing direct patient care, masks are to be worn continuously, as much as possible. A mask does not need to be removed between patient interactions, even if a patient is isolated under droplet and contact precautions (i.e., the face shield provides protection of the mask). This includes clinical workstations, hallways and teaching rooms. Some Hospitals may require face protection in nursing stations, please refer to your local hospital policy.
3. For Learners not performing direct patient care tasks, masks may be temporarily removed while alone in a defined area (e.g. in an office or behind a physical screening barrier).
4. For seminar rooms, simulation rooms and classrooms, Learners should wear a mask for interactions in spaces where a 2 metre distance cannot confidently be maintained.
5. Masks may be temporarily removed only where 2 metres of physical distance can be confidently and consistently maintained from others such as in a large conference room or auditorium.
6. If a mask is temporarily removed under the conditions identified above, the person should perform hand hygiene before and after donning and doffing, and follow Hospital IPAC recommendations on safe storage (e.g., place on a clean surface with inner mask facing upward to avoid contamination).

LOUNGES & EATING

1. The number of people in lounges or call rooms should be limited to provide a minimum of 2 meters distance between them.
2. All individuals must perform hand hygiene upon entering and exiting common lounge spaces or call rooms.
3. There should be no food or drink shared amongst persons.
4. When eating snacks or lunch, clinical learners should temporarily remove or discard their masks. If a mask is temporarily removed, the person should perform hand hygiene and follow hospital IPAC recommendations on safe storage (e.g., place on a clean surface with inner mask facing upward to avoid contamination).
5. The safely stored mask or a new mask should be donned prior to resuming clinical work.

GROUPS

1. Small group learning should be limited so that the group size can be accommodated using physical distancing or appropriate use of masks within the spaces available for this activity in the clinical environment.
2. Direct bedside teaching should be limited to activities which are necessary for individual learners to obtain the relevant clinical competency and where direct patient contact is required to complete the learning or skill related to that competency. Please refer to your local Hospital policies for restrictions (e.g., numbers of individuals).

REFERENCES

Toronto Region COVID-19 Hospital Operations Table Recommended Guidance - Masking in Hospitals
Version July 6 2020

City of Toronto COVID 19: Mandatory Mask or Face Covering Bylaw July 7 2020