Promoting the Safe Delivery of Clinical-Based Face-to-Face Training and Assessment across Wales during the COVID-19 Pandemic

Guidance for Training/Assessment Organisers
Version 3.1 December 2021

Educational events should be delivered online whenever possible and appropriate. There are, however, some training events and courses that require face-to-face interaction, for example those involving simulation and clinical skills training, that are part of induction or essential adjuncts to workplace-based training.

The following is not an exhaustive list of measures and cannot anticipate for all eventualities but rather is guidance developed to support the safe training and delivery of face-to-face interactions. It must be considered by those delivering education events at a local level, in the context of the most up-to-date local and national guidance, legislation and alert level, to ensure that the applicability of this document is applied appropriately.

The most up-to-date versions of this and any associated documents must be used.

This document incorporates the Welsh Government’s three key steps for minimising the risk of exposure to COVID-19 at work.\(^1\) \(^2\) It works from an ‘Alert Level 0’ document \(^2\) with the appreciation that different requirements are needed at different Alert Levels for Wales. In addition, it is not aimed at NHS settings, but the general requirements are applicable to health and social care settings.\(^2\) Regular re-review is needed to respond to changing circumstances.

The three key steps are:
1. Carrying out COVID-19 specific risk assessments
2. Providing information to those working at or visiting premises of the risks to them identified through the risk assessments and the measures taken to try and minimise the risks
3. Taking all reasonable measures to minimise the risk of exposure to, or spread of COVID-19

General Principles

Provision of safe face-to-face training is the responsibility of everyone involved.

All face-to-face education/training events requires taking responsibility for:
- Delivering education/training events by means other than face-to-face training, whether in part or fully, where possible. This includes shared online materials, remote observation, video assisted simulation, online webinars, virtual reality platforms etc as alternatives.
- Proceeding with face-to-face training only if local organisers and management are agreeable and confident that it is safe to do so and, if on assessment, the benefits outweigh the risks. Where possible, conducting face-to-face training away from hospital sites.
- Ensuring all specific activity and behaviour relating to face-to-face training delivery is guided by local risk assessments and policies, where applicable.
- Taking appropriate action before (see Section 1) during (see Section 2) and after (see Section 3) any face-to-face education/training event to ensure safe delivery.

\(^1\) https://gov.wales/keep-wales-safe-work.html
Section 1: Before Face-To-Face Education/Training Events

Please ensure that you are working to the current Alert Level for Wales

Risk Assessments 1,2,4,16

- A specific COVID-19 risk assessment should be undertaken prior to each education/training event taking into consideration the venue, situation and specific education/training event. It should be used as a basis to identify what reasonable measures need to be implemented to minimise the risk of exposure to, or spread of COVID-19. Any identified requirements should be addressed and actioned. Each risk assessment should be retained for records.
- Risk assessment should be based on local risk assessments and policies which have, where necessary, incorporated advice from local infection control and health and safety teams and other relevant stakeholders, as well as considered national guidance and legislation and the Alert Level for Wales at that time point.
- “When thinking about reasonable measures to take, it is important to consider the Alert Level in force and general advice from Welsh Government and public health authorities about the level of risk.” “The measures that are reasonable to take at a low Alert Level may differ from those which are reasonable when the Alert Level is high ...” 2
- In-situ simulation in the clinical environment warrants particular risk assessment and consideration. 3

Providing information and Setting Safety Expectations 1,2

- Information should be available to those attending regarding the risks to them of exposure to, or spread of COVID-19 while at the education/training event and what measures have/will be undertaken to minimise the risk.
- Information should be provided to each attendee about the measures they need to undertake while at the event to minimise the risk of exposure to or spread of COVID-19. It should be made clear what the PPE and behavioural expectations will be.
- Ideally this information should be provided to all attendees prior to the event but should be made clear at the start of the education/training event and reinforced over the duration of the event e.g. through the use of posters.

Venue 1,2,4,16

- The number attending any education/training event should be determined by local risk assessments and policies and national guidance and legislation. This should take into consideration any reasonable risk mitigating measures needed to minimise the risk of exposure to, or spread of COVID-19. As a result, the number attending may need to be reduced.
- Potential risk mitigating measures to minimise face-to-face interaction include (but not exhaustive): e.g. staggering starting and leaving times, workshop changeover times, meal and break times; incorporating one-way systems; use of physical barriers; minimising time at the event; using outdoor areas where possible etc.
- There should be access to ample washing facilities and/or alcohol gel, which is well signposted.
- Good ventilation is important. Poorly ventilated areas should be avoided. Ventilation should be considered and optimised as part of the risk assessment.
- For ‘large’ events, please refer to relevant legislation to ensure all requirements are considered.

Travel, Food and Accommodation

- Follow current polices, guidance and legislation regarding travel and overnight stays.
- The provision of refreshments and food should be based on local risk assessments and policies.
- Areas allocated to coffee and food breaks should also undergo risk assessment(s) and be guided by local risk assessments and policies and national guidance and legislation, to ensure that refreshment facilities allow for reasonable measures needed to minimise the risk of exposure to, or spread of COVID-19, taking into consideration that face coverings will not be able to be worn while eating and drinking. 4,16

Lateral Flow Tests 2

- It is strongly recommended that anyone attending an education/training event undertakes a lateral flow test prior to attending the session (taken as close to the start of the event as possible) and only attend if it is negative. Should the education/training event span over multiple days a lateral flow test should be
undertaken by each person on each day.

- Local risk assessments and policies and national guidance and legislation should determine such considerations as how this is communicated to those attending and how it is actioned.
- Local University guidance should be followed regarding lateral flow testing requirements when on University premises.
- Current national guidance and legislation should be monitored for lateral flow testing requirements in the health and care setting.  

Contact or Unwell with COVID-19

- All attendees (trainee, trainer, actor, lay volunteer, patient etc) should be advised that they should not attend the education/training event if they –
  - have COVID-19 symptoms or are unwell in any other way
  - have been confirmed COVID-19 positive in the last 10 days
  - are legally required to isolate e.g. they have been in contact with COVID-19 in the last 10 days and are not fully vaccinated
  - have been contacted by ‘Test Trace Protect’, an equivalent service or the COVID-19 app and advised to isolate
  - should be quarantining post-international travel
- Attendees who have been informed that they are contacts of COVID-19 confirmed cases should notify the event lead and follow advice in the WG guidance.
- Local policies and guidance should be in place for what to do in the event of an attendee developing COVID-19 type symptoms during the education/training event.

General IP&C considerations

- Approaches to good general IP&C measures should be emphasised at all times.
- Those attending any education/training event should only do so if generally well and symptom free of any potential infectious disease such as flu and norovirus amongst others.
- All involved in health and care training are encouraged to be up to date with vaccinations to promote the delivery of safe education and training.

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6 https://gov.wales/self-isolation
15 https://gov.wales/covid-19-testing-healthcare-workers

*See reference 2 for guidance on what constitutes ‘reasonable’ when considering risk mitigating factors to minimise exposure to, or spread of COVID-19* Please consider this in the context of the current Alert Level for Wales.
Section 2: During the Face-To-Face Education/Training Event
Please ensure that you are working to the current Alert Level for Wales

Physical/Social Distancing

- Maintaining physical distancing remains an important risk mitigating measure.
- It can be achieved by a variety of different approaches e.g. limiting numbers present, changing layout, managing use of corridors, stairs and lifts etc.
- Physical distancing should be considered as part of a collective of reasonable measures undertaken to minimise the risk of exposure to COVID-19 during the event.
- 2 metre physical distancing is a recommendation across all health and care settings where feasible, please see relevant Alert Level documents for physical distancing requirement for other venues.

Face Coverings

- Face covering requirements at the education/training event should follow current national guidance and legislation as well as local risk assessments and policies.
- This includes face covering requirements on the journey to the session, including on public transport and passage through public areas, different hospital departments etc.
- Local University guidance must be followed regarding use of face coverings when on University premises.
- Face covering requirements in health and care settings are complex and based according to whether the individual is a visitor, member of staff, where within the healthcare setting the individual is placed, whether 2m can or cannot be maintained, whether in a non-clinical or clinical area. With this in mind, it is recommended that local guidance is referred to for advice on whether a face covering is needed, under which circumstances and what type of mask. If in any doubt, the safest option will be to use a Type IIR fluid resistant surgical mask at all times while in the health and social care setting.
- Where ‘close contact training’ (i.e. training where 2m distancing cannot be maintained at all times) is being undertaken, a Type IIR fluid resistant surgical face mask and additional PPE is required. Please see Appendix 1 for full details.
- Where 2m distancing can be maintained and there is no other requirement to wear a face covering, each attendee should still feel able and welcome to wear a face covering should they wish.
- Welsh Government advice should be consulted regarding any person exempt from wearing a face covering.
- Please be aware that any face coverings other than a Type IIR fluid resistant surgical face mask are considered source control only and not PPE.

Hand Hygiene

- Regular hand washing and use of alcohol gel should be encouraged throughout the event, as well as good respiratory hygiene.
- Refer to local risk assessments and policies and national guidance and legislation to where hand sanitation facilities should be provided and required signage for promoting good practice.
- Key points for hand hygiene include (but not exhaustive):
  - Arrival and leaving a venue
  - Start and end of any sessions
  - Before and after handling shared equipment e.g. manikins, desks, computers
  - Donning and Doffing PPE

Cleaning Expectations

- Venues should be cleaned regularly with particular attention to frequent touch points such as door handles, chairs, tables, telephones, keyboards, toilets and sinks.
- The frequency of cleaning should be guided by local risk assessment and policies and national guidance and legislation.

Cleaning and Decontaminating Equipment

- Manikins, part task trainers and any other equipment used should be cleaned and decontaminated as per local SOPs based on manufacturer and local IP&C guidelines. Note - this may differ according to whether the education/training event has occurred within a designated learning environment or in-situ within the clinical environment.
• Time should be allowed to allow cleaning and decontamination between sessions.
• Sharing of equipment should be discouraged if it cannot be adequately decontaminated between uses.
• Single use equipment should be advocated where possible e.g. bed sheets, pens.

Use of Patients, Actors and Lay Volunteers
• Alternatives to patients, actors and lay volunteers should be considered where able. Consider use of volunteer faculty in first instance. If patient involvement is necessary, secure permission from the Medical Director or designated deputy, for example Clinical Director or AMD for Medical Education, and ensure local risk assessment and consent processes are followed.
• It is strongly recommended that patient, actors and lay volunteers undertake a lateral flow test prior to attending any education/training event (taken as close to the start of the event as possible) and only attend if it is negative. Should the education/training event span over multiple days a lateral flow test should be undertaken on each day.
• Patients, actors and lay volunteers should all be screened prior to the start of the training event to whether they have any COVID-19 type symptoms or are unwell in any other way, if they have been confirmed COVID-19 positive in the last 10 days, if they are legally required to isolate e.g. they have been in contact with COVID-19 in the last 10 days and are not fully vaccinated, if they have been contacted by ‘Test Trace Protect’, an equivalent service or the COVID-19 app and advised to isolate or that they should be quarantining post-international travel.
• Patients, actors and lay volunteers should all wear a Type IIR fluid resistant surgical face mask for the duration of any face-to-face training event as a minimum. All other PPE should be made available to them should they so wish. See Appendix 1 for PPE requirements when there is close contact (less than 2m physical distancing cannot be maintained).
• Attending patient, actor or lay volunteer who have been informed that they are contacts of COVID-19 confirmed cases should notify the event lead and follow the advice in the WG guidance 2,5,6
• Local policies and guidance should be in place for what to do in the event of any participating patient, actor or lay person developing COVID-19 type symptoms during the education/training event.

Close Contact Training
For specific guidance on close contact training (i.e. training where 2m distancing cannot be maintained at all times) such as simulation and clinical skills training and patient-facing activity see Appendix 1.

Training involving Aerosol Generating Procedure(s) (AGP)
For specific guidance on training that involves aerosol generating procedure(s) (AGP) see Appendix 2.

7 Infection prevention and control for seasonal respiratory infections in health and care settings (including SARS-CoV-2) for winter 2021 to 2022 - GOV.UK (www.gov.uk)
8 https://gov.wales/face-coverings-guidance-public
9 Goodall, A. Letter:’COVID-19 Mandatory wearing of face coverings in shops and other indoor spaces in Wales. Received: NHS Chief Executives, Directors of Social Care. 28th September 2020.

*See reference 2 for guidance on what constitutes ‘reasonable’ when considering risk mitigating factors to minimise exposure to, or spread of COVID-19* Please consider this in the context of the current Alert Level for Wales.
Section 3: After Face-To-Face Education/Training Event

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Data Collection 1,2

- A list of all those in attendance at the education/training event should be kept as records. This includes name, contact telephone number, date and the times the person (arrival and leaving) was in attendance.
- All attendees should be made aware that their details will be forwarded to ‘Test Trace Protect’ to facilitate the process of contact tracing should circumstances require.
- Guidance can be found at https://gov.wales/keeping-records-staff-customers-and-visitors-test-trace-protect
- Local risk assessments, policies and guidance should determine how data protection requirements are met.

Review & Governance

- Measures that are put in place should be regularly reviewed to see if they are effective and safe or whether they need adapting or even removing.
- Regular review of compliance with processes is encouraged.
- Obtain and share examples of good practice regarding face-to-face training from other colleagues, groups, departments, hospitals and higher education institutions etc.
Appendix 1
Measures to minimise exposure to COVID-19 during close contact training such as simulation and clinical skills training and patient-facing activity

Close contact training = training where 2m distance cannot be maintained between everyone present at a training event for the whole duration of the session

- Maintaining 2m distancing remains an important measure and every reasonable effort should be made to ensure that 2m distance between people can be maintained.
- PPE should be worn as outlined below.
- Follow local IP&C and Health and Safety guidelines regarding the use of FFP3 valved masks/valved powered hoods with regards to undertaking sterile procedures.

<table>
<thead>
<tr>
<th>Type of Face-to-Face Training</th>
<th>Examples</th>
<th>PPE required 7, 10 Must be worn at all times</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient facing - Non AGP</td>
<td>Examinations</td>
<td>• Type IIR fluid resistant surgical face mask</td>
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<tr>
<td></td>
<td>Examination rehearsal</td>
<td>• Single use or re-usable eye protection/face visor</td>
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<td></td>
<td></td>
<td>• Apron</td>
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<td></td>
<td></td>
<td>• Gloves</td>
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<td></td>
<td></td>
<td>Health Board IP&amp;C policy should always be followed</td>
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<tr>
<td>Patient facing - AGP</td>
<td>Joint ENT/anaesthetic airway training cases</td>
<td>• FFP3 mask or equivalent</td>
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<td></td>
<td>CPAP</td>
<td>• Single use or re-usable face visor</td>
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<td></td>
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<td>• Gown</td>
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<td></td>
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<td>• Gloves</td>
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<td></td>
<td></td>
<td>Health Board IP&amp;C policy should always be followed</td>
</tr>
<tr>
<td>Training with relevance to providing direct clinical care* – Non AGP</td>
<td>Clinical skills: Cannula insertion, Abdominal examination</td>
<td>• Type IIR fluid resistant surgical face mask</td>
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<tr>
<td></td>
<td></td>
<td>• Single use or re-usable eye protection/face visor</td>
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<td>• Apron</td>
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<td></td>
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<td>• Gloves</td>
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<tr>
<td>Training with relevance to providing direct clinical care* - AGP</td>
<td>Clinical skills: Tracheostomy care, dental drilling</td>
<td>• FFP3 mask or equivalent</td>
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<td></td>
<td></td>
<td>• Single use or re-usable face visor</td>
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<td>• Gown</td>
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<td></td>
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<td>• Gloves</td>
</tr>
<tr>
<td>All other training</td>
<td>Group training, demonstrations etc where 2m distancing can’t be maintained</td>
<td>• Type IIR fluid resistant surgical face mask</td>
</tr>
</tbody>
</table>

AGP = Aerosol Generating Procedure
*for non-patient facing training these recommendations promote and rehearse for good PPE practice in the workplace. Any deviation from this guidance (e.g. in the use of eye protection or FFP3 masks) requires risk assessment and approval by senior management responsible for the event. A Type IIR fluid resistant surgical face mask, gloves and apron must be used as minimum*

- PPE must be worn correctly and for the whole duration of the education/training session
- Ensure that protocols are in place for decontaminating and cleaning re-usable PPE
- Sessional vs. single use PPE:
  - Type IIR fluid resistant surgical face masks, FFP3 masks or equivalent and eye protection/face visor can be used on a sessional basis.
  - all other PPE (apron, gloves, gowns) should be single use and changed between clinical tasks and patients
  - In clinical areas, follow IP&C policy of the Health Board / Trust

PPE to be worn by patients, actors and lay volunteers | Type IIR fluid resistant surgical face mask is minimum
All other PPE should be made available to them should they wish
• Consider the provision of scrubs rather than use of own clothes.
• Ensure the attendees are appropriately trained in safe donning and doffing of PPE.
• Ensure adequate supply of appropriate PPE for the duration of the education/training session.
• Safe donning and doffing areas should be set up.
• Ensure safe means of discarding and disposing the PPE.
• Type IIR surgical face masks may be worn throughout a session of training, but will need changing if damaged, contaminated or wet and removed (doffing) correctly.
• Hand hygiene should be performed prior to and immediately after handling shared equipment.
• Hand hygiene should be performed prior to and immediately after handling PPE.

Please be aware that any attendee at a ‘close contact’ training event (i.e. training where 2m distance cannot be maintained by everyone present for the whole duration of the training session) where there is a COVID-19 positive person, will be contacted by ‘Test Trace Protect’ and treated as a COVID-19 contact if they have worn any face covering other than a Type IIR fluid resistant surgical face mask.

Therefore, a Type IIR fluid resistant surgical face masks must be worn as a minimum for all ‘close contact’ training.

This should be reinforced alongside the importance of other key behavioural measures for minimising COVID-19 transmission including physical/social distancing and good hand hygiene etc.

10 Dr Eleri Davies for Public Health Wales, personal communication, 21st October 2020 & 15th November 2021
11 20200821_COVID-19_Non AGP_Putting on PP...tion control precautions-B (2) (3).pdf (publishing.service.gov.uk)
12 20200821_COVID-19_Airborne precautions_Putting on PPE gown version-1 (1).pdf (publishing.service.gov.uk)
13 20200821_COVID-19_Non AGP_taking off_PP...tion control precautions-1 (1) (1).pdf (publishing.service.gov.uk)
14 20200821_COVID-19_Airborne precautions_Removing PPE gown version-2-1.pdf (publishing.service.gov.uk)
Appendix 2

Measures to minimise exposure to COVID-19 during training that involves aerosol generating procedure(s) (AGP) 3,7,10

Note - this would include any training with relevance to ventilator use, CPAP machines, drilling, open suctioning, intubation and extubation etc.

Please check local guidance for what is deemed as an AGP including CPR, Nasogastric insertion etc.

- Training involving AGPs should be undertaken on clean manikins and part task trainers.
- Care should be taken to minimise aerosolising any ‘surrounding’/immediate environment.
- PPE to be used, as detailed in Appendix 1.
Additional Sources of Information

1. HSE Working safely during the coronavirus pandemic – a short guide

2. NHS HEE / ASPIH COVID-19 toolkit for safe simulation in health and care

3. Welsh Government Infection control framework for higher education
   https://gov.wales/infection-control-framework-higher-education