

The Office of the Deputy Under Secretary for Health for Operations and Management is sending the email below on behalf of the Office of Academic Affiliations. Please share with medical center leadership.

Office of Academic Affiliations Guidance – Health Professions Trainees and COVID-19 – March 11, 2020

The Office of Academic Affiliations (OAA) is reaching out to Designated Education Officers (DEO) and other facility education staff to provide a consensus guidance document related to health professions trainees (HPT) and COVID-19. OAA realizes that there are a lot of issues and questions being asked. This guidance will be updated and redistributed as necessary.

Basic Infection Control and Hand Hygiene

All trainees, faculty and staff should know general CDC guidance for decreasing risk of transmission, whether in the hospital, clinic or out in the community. Please see this webpage for the basics: <https://www.cdc.gov/coronavirus/2019-ncov/about/prevention-treatment.html>

Trainee Involvement in Care of Suspected or Documented COVID-19 Patients

One of the most critical questions is “what is the appropriate level of trainee involvement in the care of suspected or documented COVID-19 patients”. Trainees vary greatly in their capabilities by level of training, profession and specialty/sub-specialty. To maximize trainee safety, trainees should only be asked to deliver care for individuals within their defined experience and training and supervised by individuals skilled in basic infectious disease management and personal protection. Many academic centers are choosing to keep medical students and even physician interns out of the patient care rooms of suspected or documented COVID-19 patients due mainly to a shortage of personal protective equipment such as gowns and masks. And some are using staff physicians only to manage these infectious patients to minimize the number of health care providers who are ultimately exposed and/or infected. However, there are many roles to play in our facilities, and trainees are important members of our health care provider community. There are plenty of other patients to see! OAA is continuing to monitor accrediting body and professional organization statements regarding trainee engagement and COVID-19. The following webpage from AAMC appears applicable to all health professions and conveys both the variability and nuances of these tough decisions.

<https://www.aamc.org/news-insights/what-we-do-academic-medicine-mobilizes-prepare-covid-19>

Please note that the AAMC webpage references this Ebola-era video to use best practices in putting on and taking off

PPE: <https://www.youtube.com/watch?v=bG6zISnenPg> . OAA recommends that this video be widely disseminated and viewed.

For current ACGME advice, see the following

weblink: <https://acgme.org/Newsroom/Newsroom-Details/ArticleID/10068/ACGME-Guidance-Statement-on-Coronavirus-COVID-19-and-Resident-Fellow-Education-and-Training-Considerations>

Quarantines and trainees

Paid trainees have all the same leave options as regular paid employees. The key takeaway point is that “Weather and Safety Leave” is an administrative leave category for trainees (and staff) that are quarantined but not infected. Once trainees are ill, sick leave should be taken. Options for advanced sick leave are also available. For disbursement paid trainees, options are different. Please contact OAA’s Action Group for advice on specific situations regarding disbursement paid trainees.

Trainees and Telehealth

As medical centers try to enhance telehealth activities and reduce face to face interactions for the safety of both patients and staff, many have asked about trainee involvement in telehealth activities. OAA is pleased to offer the following advice.

- Telehealth visits with the supervisor co-located with the trainee have always been permitted, so these visits should continue during this health crisis.
- Telehealth visits where the trainees are not co-located with the supervisor (for example, patient, supervisor and trainee are all on a telehealth visit but are at three different locations) are **now permitted during this health crisis**.
- If a local or national emergency has been declared, and/or facility health care workforce is depleted due to illness among healthcare workers, quarantine or taking care of COVID-19 cases, trainees may host telehealth activities without supervisors in the room or on the line. These encounters must still be discussed with a supervisor and have appropriate trainee supervision documented in the electronic health record. Both the Associate Chief of Staff for Education (Designated Education Officer) and the affiliate program director (as appropriate) would need to approve these more unique telehealth activities.
- Note, if a national emergency is declared, restrictions on trainee telehealth activities across state lines **may** be rescinded for the duration of the emergency. Appropriate legal guidance will be sought.

Trainees and Telework

- Trainees under quarantine may be assigned administrative leave (“weather and safety leave”) as noted above. Conversely, they can be put on a telework agreement and be assigned research, scholarly activities, process improvement work, or even telehealth activities. While those activities may or may not count towards clinical hours, it does still allow them to do meaningful work, and potentially count towards graduation requirements. Again, both the

Associate Chief of Staff (Designated Education Officer) and the affiliate program director (if appropriate) would need to approve these telework options.

NOTE: OAA will update this guidance for Health Professions Trainees and COVID-19 infection when necessary by monitoring national CDC guidance, and accrediting and professional organization recommendations.

Please feel free to contact OAA by sending an email to: VHA 10X1 Action.