On March 11, 2020, the World Health Organization (WHO) formally declared COVID-19 a pandemic (WHO, 2020). As of March 19, there are over 223,000 confirmed cases across the globe with over 9000 deaths. OADN is committed to ensuring the safety of faculty and students, and recognizes the importance of continuity of teaching and learning throughout the outbreak. Given the rapid spread of Covid-19 within the United States the following information is provided to schools of nursing to help guide decision-making:

- **CDC Updated guidelines for Institutions of Higher Education**: As of yesterday, the CDC issued updated guidance for Institutions of Higher Education (IHE), recognizing that working together with local health departments, their important role in slowing the spread of diseases, and protecting vulnerable students, staff, and faculty to help ensure a safe and healthy learning environment. Guidance for IHE is organized into three categories based on the level of community transmission: 1) when there is no community spread; 2) minimal to moderate community spread; and 3) substantial community spread.
transmission (preparedness phase), 2) when there is minimal to moderate community transmission, and
3) when there is substantial community transmission. **Consult with your local health department to
determine what level of transmission is currently occurring in your community.** The CDC decision tree
should be used as a foundation for preparedness and response action steps.


**Suspension of Nonclinical courses:** Many IHEs have already elected to suspend in-person classes through the end of the spring semester to protect the health and well-being of faculty, students and staff. Each school of nursing should follow institutional policies and local public health agencies’ recommendations. **Where local outbreaks are occurring, local public health decisions must be followed, and schools will be obligated to not convene in-person classes, large group meetings, etc. Schools may choose to be more restrictive than local public health agencies require.** You are strongly encouraged to put into place what is needed to move all coursework online, and to develop your communication strategy. **Graduation ceremonies and all school-related events involving greater than ten people should be postponed or cancelled.**

Schools should implement their contingency plan for all classroom based work. Resources to consider: Moving course content to online course software platforms, use Zoom, WebEx and Go to Meeting to host e-lectures, pre-record lectures to send to students. Increase access/license online content to enhance and deliver knowledge through digital and mobile resources.

**Clinical placements and patient interactions:** Student nurses are valuable members of the health care team and contribute to the provision of care in hospitals and community health care settings. In these situations, student placements and level of involvement in the patient care arena is determined by school policies that consider well-established transmissibility data and morbidity/mortality data. For COVID-19, as of March 19, 2020 critical data about transmissibility, morbidity, and mortality is still evolving, even as we need to make important decisions. **Therefore, it may be advisable, in the interest of student safety, to limit student direct care of known or suspected cases of COVID-19 infection until better epidemiologic data are available. For now, other than limiting direct care of COVID-19 patients, clinical students continue their roles as part of the care team. Schools should communicate regularly with their local health departments for updated guidance and make changes to this policy as needed.**

Schools of Nursing are encouraged to develop contingency plans should future restrictions on clinical placements occur. These plans may include the expanded use of simulation and virtual reality, the use of online resources for teaching clinical care, and online group chat features.

**Personal Protective Equipment:** Concerns persist regarding the potential shortage of personal protective equipment in the U.S. **Student clinical placements that require the use of PPE should be deferred in order to protect the nation’s supply of PPE.**

**Educational experiences** that require faculty and/or student travel such as study abroad programs, medical & nursing mission trips and online nursing programs with ‘on-site’ immersion experiences: Schools of nursing should follow the CDC and Department of State travel advisories to postpone or cancel all international travel. Schools should postpone all domestic travel for now as the outbreak spreads.

**Teaching:** Each School of Nursing should review the infection control and prevention content contained within its curriculum and to consider expanding the amount of content covered and the frequency with
Infection control and prevention content can be easily ‘threaded’ through multiple courses and programs or offered as “just-in-time” training. This information is **critical** to helping keep nurses and nursing students safe. At a minimum basic infection control and prevention topics to cover include:

- **Surveillance and Detection**
- **Isolation, Quarantine and Containment**
- **Standard, Contact and Airborne Precautions**
- **Proper Handwashing, Cough and Respiratory Etiquette**
- **Selection and Appropriate Use of Personal Protective Equipment (PPE)**

**Surge Capacity as outbreak intensifies:** Pandemic contingency staffing plans may include the potential use of nursing students should the outbreak accelerate to the point that our current national nursing workforce is unable to meet the demand for health care services. **While we hope that this situation is not realized, schools of nursing are advised now to develop plans and protective actions regarding how nursing students might be allowed to go into selected areas of the clinical setting should the pandemic worsen.** With proper hospital or nursing school screening to ensure students are healthy, senior students have a level of skill that will be helpful and they may be valuable additions to the staffing mix. Even if they are not able to function as RNs they can take over many of the duties of CNAs or LPNs. The extraordinary measures that nurses and nursing students have been required to take in other countries affected by COVID-19, such as China, Italy and Iran, suggest that should the outbreak intensify consideration should be given to utilize the skills of students and not exclude them.

**Illness:** Faculty, students and staff who are ill or develop Covid-19 symptoms (fever, cough, shortness of breath) **need to stay home** from school, clinical placements and work. They should contact their primary health care providers (Call before going to the office or emergency department, wear a facemask), and then notify their school and occupational health officer if they have recently been in the clinical setting.

**Emotional/Mental Health Support:** Everyone is affected by the pandemic and the nursing education community is encouraged to follow the three ‘C’s’ of disaster response: Communication, Collaboration & Cooperation. Working together, we can strengthen our contribution to the response effort, sustain business continuity, and build our resilience for future events. Schools of nursing are encouraged to remain vigilant of the emotional and mental health burden that this outbreak is creating on faculty, students and staff. Ensure that resources are available for anyone who needs support.

Useful nursing resources for response to COVID-19:

- The Centers for Disease Control and Prevention (CDC) is our ‘gold standard” for evidence-based information in the U.S. The CDC Covid-19 web page can be located at: [https://www.cdc.gov/coronavirus/2019-ncov/index.html](https://www.cdc.gov/coronavirus/2019-ncov/index.html) Nurses should visit this site regularly for updated guidance on the rapidly evolving pandemic.

- Johns Hopkins School of Engineering interactive coronavirus map is updated daily and can be located at: https://gisanddata.maps.arcgis.com/apps/opsdashboard/index.html#/bda7594740fd40299423467b48e9ecfe6


Tener Goodwin Veenema

Tener Goodwin Veenema RN PhD MS MPH FAAN
2018-19 Distinguished Nurse Scholar in Residence
National Academy of Medicine, Washington, DC
Professor of Nursing and Public Health
Johns Hopkins School of Nursing
Johns Hopkins Bloomberg School of Public Health
tweenem1@jhu.edu