



EMS Placement Health and Safety Guidance for Practices

Introduction and Objectives

The primary objective of Health and Safety during EMS must be to achieve a safe secure placement for the student whilst protecting the practice team from COVID 19.

Prior to taking a student on placement it would be advisable to review your COVID risks using the [COVID Risk Checklist Tool](#) provided for SPVS members. This will help you ensure that you have a robust plan in place to keep your team safe.

The principle of introducing a new person into your practice team is to minimise risks of disease introduction and if it were to occur to minimise subsequent impacts.

Each placement student should be emailed with an EMS placement Health and Safety Self-Assessment Form for Students which aims to address key areas of risk management. You will need to assess this form prior to accepting the student. You may wish to include other resources as they become available.

The form will change. It is possible for instance that pre-testing of students may become feasible in the future as a norm.

Teasing out these questions will be helpful in terms of reassuring your team that you have taken reasonable steps to reduce the risk of disease introduction.

Currently the 4 areas of risk are Prevalence, Quarantine, Travel/ Living and EMS arrangements during the practice. These are summarised in the table below.

Prevalence	Quarantine and Risk Reduction
Compare prevalence in area of student with the practice? Vet school? Social bubble? How has this changed? Year group and regionally	Ability to self-isolate(reduce contacts 2 weeks prior to placement? Ability to reduce contacts to defined low risk bubble/ clinical rotation?
Travel and Living	EMS arrangements
Risks of infection during travel and at accommodation whilst seeing practice?	Working with a specific vet? Working with a specific team? Limitations on close supervision? Support for separate ambulatory transport? Is this required?

There is no such thing as a risk-free introduction of a new person to the practice. However, what the aim is to reduce the risk of disease breakdown to the level of any current staff member.

SPVS have a short video which discusses the challenges and top tips of EMS during COVID times. [Please feel free to view](#). This resource is provided FOC by SPVS.

Interpreting the Student risk assessment

Prevalence

The purpose of the prevalence question is to establish what the likely prevalence in the locality of the student. Ultimately the risk will be partly driven by regional disease levels, but the more important elements are the levels within the vet schools. In some Universities robust testing programs in place and anecdotal feedback from Universities reveals that the final years are taking a highly responsible approach to COVID risk management. If they test positive, they are asked to self-isolate and this further impairs their learning and personal movements.

Quarantine and living arrangements

The objective of this question is to establish what has been happening in the 2 weeks prior to the placement.

It is entirely possible the student may be moving from one COVID secure placement to another. In some instances, 2-week self-isolation may be possible but in many cases reducing contacts to a single low risk household and a monitored bubble with the University may provide a similar level of protection.

Travel and Living arrangements

Given that people contact within domestic settings is such an important element then consideration needs to be given to the living arrangements.

If practice accommodation is available this may help reduce contacts. However, moving in with family may be a similar risk profile as your own staff.

Travel too and from the practice needs some thought. Most public transport is COVID low risk and many students may have their own car. The use of PPE and diligent hand washing during use of public transport may suffice to reduce risks.

EMS experience during the placement

This is an important area to discuss prior to the placement. Expectations must be managed. The student must fit in with the current COVID plan. However, if a student is provided a placement then the working arrangements must be explained prior to arrival. What the student does on arrival? What induction plan/ discussion will happen? What you can or can't do during the placement? How ambulatory visits can be managed and what provision and support is there for students that do not have vehicles or need support with fuel payments? Are students embedded with one vet or one team?

General concerns and discussions

A day 1 induction is vital to ensure that the EMS placement is successful. Further support materials for EMS are in the process of development by SPVS. Ensuring the student is welcomed, supported and guided through the placement is hugely important during these challenging times.

References

[RCVS guidance on EMS](#)

[BVA guidance on EMS provision by practices](#)

[SPVS Resources EMS](#)