Protocol for incidents of medical student workplace injury and exposure to infectious disease in clinical settings

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Overview
The University of Toronto MD Program is committed to promoting medical student safety and to facilitating appropriate support for students who become injured or potentially exposed to infectious disease in the course of their studies or training. The clinical sites affiliated with the University of Toronto are likewise committed to risk reduction among medical students and to the timely and effective management of incidents of medical student injury or potential exposure that occur on their premises. The Academy anchor hospitals play a special role in providing follow-up care to students of that Academy who incur such an injury or potential exposure at another site. Together, the MD Program, the Academies, and all the clinical affiliates ensure that medical students receive the assistance they require in the aftermath of an injury or potential exposure to infectious disease.

This Protocol defines the roles and responsibilities of every party involved in the handling of incidents of injury and potential exposure, and is comprised of the following parts:
Part A: Financial Responsibility
Part B: Administrative Responsibilities
Part C: Detailed Protocol
   a. Responsibilities of students
   b. Responsibilities of supervising physicians
   c. Responsibilities of health professionals who provide initial care
   d. Responsibilities of follow-up health care providers
   e. Responsibilities of Academy Directors
   f. Responsibilities of U of T WSIB Administrator
   g. Responsibilities of Associate Dean, Health Professions Student Affairs

Appendix 1: Protocol Flowchart

Part A: Financial Responsibility
Medical students are eligible for Workplace Safety Insurance Board (WSIB) coverage of claims while on unpaid placements required by their program of study. Private insurance is provided should the unpaid placement required by the MD Program take place within a site that is not covered by WSIB. The Ministry of Advanced Education and Skills Development (MAESD) ensures that students on work placements receive WSIB for placement sites that have WSIB coverage and private insurance for sites that are not covered by WSIB for injuries or disease incurred while fulfilling the requirements of their placement. WSIB insurance does not cover any self-initiated observership, informal shadowing or other clinical activities outside of the MD Program that are not eligible for the MAESD coverage.

In addition, all medical students at the University of Toronto are strongly encouraged to purchase disability insurance in every year of the MD Program. Through this insurance, costs that are incurred due to incidents that occur during activities other than required clinical training may be covered. Furthermore, private disability
insurance may in some cases provide additional and/or broader financial support for incidents that are also covered by the WSIB. Students are encouraged to educate themselves about their disability insurance options to determine the plan and provider that best meet their needs.

All costs stemming from injury or exposure to infectious disease that are not borne by the WSIB or private insurance shall be borne by the student.

**Part B: Administrative Responsibilities**

A claim to the Workplace Safety and Insurance Board (WSIB) or private insurer should be made in all cases in which post-exposure prophylaxis (PEP) has been initiated or whenever other costs are incurred by the site of initial treatment, the site of follow-up treatment, and/or the student, following an incident that occurred in the course of required clinical training.

A claim may also be warranted in other situations where medical treatment or modified duties are required. The WSIB Administrator at the University of Toronto can provide advice if there is uncertainty as to whether to proceed with paperwork.

Please note that Ministry of Advanced Education and Skills Development (MAESD) may incur a fine for claims submitted to the WSIB later than three business days after the incident. Timeliness is therefore essential.

The responsibility to complete documentation in support of a claim rests with a variety of parties. The student’s Academy Director is responsible for liaising with all parties to ensure timely completion of the documentation and to facilitate communication among the parties as necessary.

For clarity, the following documentation is typically required from each party:

- **The student:**
  a. After receiving treatment and ensuring an appropriate incident report form or equivalent (as per Section c(1)) has been completed, the student should inform his/her Academy Director of the incident.
  b. Documentation may be requested directly by the WSIB after the claim (if any) has been submitted by the University of Toronto WSIB Administrator; there is not generally any documentation for the student to complete beforehand.

- **Faculty Registrar:**
  a. Written confirmation that the student’s injury or exposure occurred during the course of a legitimate, unpaid placement that represented part of the student’s academic program.
  b. A copy of the affected student’s signed Student Declaration of Understanding regarding WSIB and private insurance coverage through the MAESD.
  c. A copy of the MAESD Letter of Authorization to Represent Employer, with the top portion completed by the Registrar on behalf of the University.

- **Representative at the site of the incident:**
  (Note: If an incident occurs at an Academy hospital, the Academy Director may act as the representative of the hospital for the purposes of incident documentation, if this is deemed appropriate by the hospital leadership.)
  a. The bottom half of the MAESD Letter of Authorization to Represent Employer obtained from the Faculty Registrar (see above).
  b. For sites with WSIB coverage: a U of T Accident Report Form, if none was completed at the time of the incident. The University will make this form available to all affiliated sites.
  c. For sites without WSIB coverage: an private insurer Accident Report Form. The University will make this
form available to all affiliated sites.

- Occupational Health staff or other representative at the site(s) of treatment:
  a. All records related to the incident and the treatment provided to the student.

- WSIB Administrator at the University of Toronto
  b. Consolidated submission.

**Part C: Detailed Protocol**

a. **Responsibilities of STUDENTS who are injured or potentially exposed to infectious disease in a clinical setting**

   i. **Immediately following the incident, the student is expected to:**

      (1) Inform his/her supervising physician or other teacher of the incident to ensure that patient care can be transferred as appropriate.

      (2) Request that steps be taken to seek consent from the patient to draw a sample, in the case of potential exposure to infectious disease (e.g. a needle-stick injury).

      (3) Seek immediate treatment (within a maximum of two hours) from one of the following:

         a. The Occupational Health Unit or site-specific equivalent if one is present where the incident occurred, and it is during office hours. (Students should be informed of this at the commencement of each rotation. In some cases, this will be defined as the Emergency Department.)

         b. The site’s off-hours substitute for the Occupational Health Unit or equivalent if the incident occurred outside of office hours.

         c. The local Emergency Department if the incident occurred somewhere in the community.

      (4) Inform the health care provider who attends to the incident of his/her status as a medical student at the University of Toronto. If the incident has occurred in a hospital setting, the student should present his/her identification badge.

      (5) Request that a workplace incident report be filled. If the incident has occurred in the community and care is sought at a local Emergency Department where a workplace incident report may not be available, an alternative document indicating the nature of the incident and the medical treatment that was administered should be completed.

      (6) Obtain a copy of all incident reports and other paperwork.

   ii. **subsequent to receiving initial treatment, the student is expected to:**

      (1) Report any incident of injury or exposure to his/her Academy Director as soon as possible, regardless of where the incident took place.

      (2) Follow the course of treatment prescribed by the site of initial care, if any.

      (3) Obtain follow-up care and/or support, as arranged by Academy Director.

      (4) Follow the course of treatment (if any) prescribed by the designated treatment site’s Occupational Health Unit.

      (5) Comply in a timely manner with any requests to fill out paperwork related to the incident from the Academy Director, the Occupational Health Unit, the U of T WSIB Administrator, the WSIB or private insurer, the MAESD, or others.

      (6) If necessary, make appropriate arrangements with course directors, the Foundations/ Clerkship Director, and/or the Associate Dean, Health Professions Student Affairs for accommodations, absences, or other matters arising from the incident.
iii. In the event that treatment is unsuccessful and the student contracts an infectious disease, he/she is expected to:

(1) Share this information confidentially with either his/her Academy Director or the Associate Dean, Health Professions Student Affairs, who will arrange for the Expert Panel on Infection Control to convene. The Panel will determine what measures must be enacted to safeguard patients’ well-being, in accordance with the Faculty of Medicine Guidelines regarding infectious diseases and occupational health for applicants to and learners of the faculty of medicine academic programs. Information on the student’s status and health will be shared strictly on a need-to-know basis.

b. Responsibilities of SUPERVISING PHYSICIANS or other teachers when a student under their supervision is injured or potentially exposed to infectious disease in a clinical setting.

Immediately following the incident, the supervising physician is expected to:

(1) Assist the student in accessing immediate care as necessary. The site-specific workplace injury protocol should be applied.

(2) Facilitate the obtaining of consent for samples to be drawn from the patient, in cases of potential exposure to infectious disease.

(3) If the student is unable to speak for himself/herself:
   a. Describe the incident to the health professionals who provide initial care to the student.
   b. Inform the health professionals who provide initial care to the student that he/she is a medical student from the University of Toronto.
   c. Contact at least one of the student’s Academy Director, course director, or site director to inform them of the incident.

c. Responsibilities of HEALTH PROFESSIONALS WHO PROVIDE IMMEDIATE TREATMENT to medical students who experience an injury or potential exposure to infectious disease

The health professionals who provide immediate treatment to a medical student who has experienced an injury or potential exposure to infectious disease are expected to:

(1) Complete AT LEAST one of:
   a. A local institutional incident report form
   b. The U of T Accident Report Form for students
   c. The Physician’s First Report (“Form 8”)
   d. An alternative record of the incident and the treatment administered, only if the other documents named above are not available

(2) Provide a copy of all such forms and other documentation to the student.

(3) If the immediate treatment is provided at the site of the incident, and that site is an affiliate of the University of Toronto
   a. Report the incident to the Academy Director (if applicable) or other senior official of the hospital with designated oversight of undergraduate medical trainees.

(4) If arrangements are made for follow-up care to be provided elsewhere:
   a. Provide the service or consultant designated for follow-up care with sufficient details regarding the student’s initial treatment and also, in the case of a potential exposure to infectious disease, non-identifying information regarding the health status and risk factors of the patient or other individual(s) involved in the incident.

(5) Instruct staff to provide a copy of all incident records to the University of Toronto WSIB Administrator and/or the student’s Academy Director if requested in support of an insurance claim.
d. Responsibilities of the FOLLOW-UP HEALTH CARE PROVIDER

The Academy Director will ensure that the student is connected with appropriate follow-up care. The health care provider designated to provide that care is expected to:

1. Liaise with the providers of initial care, if different, to ensure that information relevant to the case is appropriately shared. Relevant information includes details of the student’s initial treatment, in the case of a potential exposure to infectious disease, non-identifying information regarding the health status and risk factors of the patient or other individual(s) involved in the incident.

2. Contact the student to update him/her on the need for follow-up.

3. Initiate and/or continue whatever treatment is deemed to be necessary.

4. Complete any paperwork requested by the Academy Director, the Vice-President Education, the U of T WSIB Administrator, or others, in keeping with the Affiliation Agreement and the WSIB Agreement between the hospital and the University.

e. Responsibilities of ACADEMY DIRECTORS, in the event of a student in their Academy incurring an injury or potential exposure to infectious disease in a clinical setting.

In order to ensure immediate responsiveness to student injury or potential exposure to infectious disease, every Academy Director is responsible for maintaining an up-to-date, site-specific protocol for handling various types of such incident, as appropriate for their Academy. This protocol must include a means by which students can be readily referred for timely follow-up care with an appropriate clinician.

i. Upon being notified that a student of the Academy has been injured or potentially exposed to infectious disease, the Academy Director is expected to:

1. Make contact with the student to assess his/her needs.

2. If relevant, confirm with the student that the appropriate health care provider for follow-up care and administration of the case have been arranged.

3. If relevant, and if the student indicates that follow-up care and administration of the case have not been arranged, liaise with the Academy base hospital’s Occupational Health Unit or other appropriate service to ensure that this is done.

4. Liaise with the Associate Dean, Health Professions Student Affairs to advise him/her of any additional support required for the student arising from the incident (e.g., counselling, special accommodations, advocacy, etc.)

5. Ensure that all required paperwork is completed and submitted by liaising with the appropriate parties, including Occupational Health Units and the U of T WSIB Administrator, as required. (See Part B of this Protocol for details.)

6. Follow-up with the student periodically to ensure that he/she receives a response regarding the claim (if applicable), to offer assistance with additional paperwork that may be required, and to verify that his/her needs arising from the incident have been met.

ii. In the event that treatment is unsuccessful and the student informs the Academy Director that he/she has contracted an infectious disease, the Academy Director is expected to:

1. Meet with the student to assess his/her needs.

2. Contact the Associate Dean, Health Professions Student Affairs, who will inform the Chair of the Expert Panel on Infection Control. Information on the student’s status and health will be shared strictly on a need-to-know basis.

iii. To ensure that the University and Hospital comply with expectations regarding tracking and analysis of incidents of medical student injury, the Academy Director is expected to:
(1) Maintain a complete record of every incident of injury or potential exposure to infectious disease involving a medical student from their Academy, with details minimally including:
   a. the type of incident
   b. the site of the incident
   c. the student’s immediate supervisor on the rotation at the time of the incident
   d. the activity in which the student was engaged at the time of the incident
   e. the follow-up that was received
   f. the documents that were submitted and to whom
   g. the student’s level of study and the course

(2) Report incidents as they arise through the regular Academy Directors’ Committee meetings.

(3) Propose recommendations as warranted to reduce the number or severity of incidents, or to improve the response that students receive.

f. Responsibilities of the WSIB ADMINISTRATOR at the University of Toronto, with respect to incidents of medical student injury or potential exposure to infectious disease

i. Upon being notified that a medical student has been injured or potentially exposed to infectious disease, the WSIB administrator is expected to:
   (1) Confirm the required documentation with the Academy Director.
   (2) Review the documentation that is submitted regarding the incident.
   (3) Follow-up with the relevant individuals regarding any additional paperwork that is required.
   (4) Submit the completed documentation to either the WSIB or private insurer as appropriate.
   (5) Inform the Academy Director and the student that the claim has been submitted.

ii. To ensure that the University complies with expectations regarding tracking and analysis of incidents of medical student injury, the WSIB Administrator is expected to:
   (1) Maintain a complete record of every incident involving a medical student that is reported to the WSIB administrative office at the University of Toronto, with details minimally including:
      a. the type of incident
      b. the site of the incident (the Academy hospital, other hospital, non-hospital)
      c. the date and details of the claim
      d. the recipient of the claim (WSIB or private insurer)
   (2) Provide data for an annual student injury and exposure report to the Associate Dean, Health Professions Student Affairs.
   (3) Perform other tracking functions as required by the University, legislation, etc.

g. Responsibilities of the Associate Dean, Health Professions Student Affairs

i. If contacted by an Academy Director or a student himself/herself regarding an injury or potential exposure to infectious disease, the Associate Dean, Health Professions Student Affairs is expected to:
   (1) Meet with the student to determine if there are any gaps in their required or desired follow-up (medical, administrative, or well-being-related).
   (2) Advocate for the student if appropriate follow-up is not forthcoming in a reasonable timeframe.
   (3) Follow-up with the student periodically regarding the status of the claim and any newly arising support they require.
   (4) Liaise with the Academy Directors, other MD Program leaders, and/or others to develop solutions to problems arising from the incident. Consideration will be given to the protection of student personal health information and issues potentially pertaining to patient safety, informed by the Personal Health Information Protection Act and Freedom of Information and Protection of Privacy Act.
ii. *In the event that treatment is unsuccessful and the student or the student’s Academy Director informs the Associate Dean, Health Professions Student Affairs that he/she has contracted an infectious disease, the Associate Dean is expected to:*

(1) Meet with the student to assess his/her needs.

(2) Contact the Chair of the Expert Panel on Infection Control. The Chair will determine whether the Panel should convene. If so, the Panel will determine what measures must be enacted to safeguard patients’ well-being, as per the Faculty of Medicine *Guidelines regarding infectious diseases and occupational health for applicants to and learners of the faculty of medicine academic programs*. Information on the student’s status and health will be shared strictly on a need-to-know basis.

See next page for Appendix 1: Protocol Flowchart
Medical student experiences an injury/infectious disease exposure in a clinical setting

Immediate response

Student:
- informs supervisor

Supervisor:
- arranges for sample testing in cases of potential exposure to infectious disease (e.g. needle-stick)
- contacts Academy Director, course director, or site director if student is incapacitated (e.g. major injury)

0-2 Hours after accident

Student: accesses emergency care as follows, depending on their location:

If accident occurs in an affiliated hospital

Student:
- goes to hospital’s Occupational Health or equivalent; follows the hospital’s after-hours protocol if outside business hours
- presents badge to intake staff

Health care provider:
- completes workplace incident report
- gives copy of all reports to student
- Communicates with university if WSIB form required

If accident occurs in the community/outside GTA

Student:
- goes to the Emergency Department of the nearest hospital
- informs health care provider they are a UofT medical student
- asks for a workplace incident report or suitable alternative to be completed
- asks for copies of any completed incident report
- liaises with Academy to determine if WSIB form is necessary

0-3 days after accident

Student:
- follows treatment regimen prescribed by initial care provider (e.g. PEP in the case of potential exposure)
- in cases of potential exposure, liaises with supervisor regarding whether sample was obtained from patient
- informs Academy Director of the accident

Academy Director:
- opens confidential file on the accident
- assesses student’s non-medical needs; contacts Associate Dean, HPSA, as appropriate/if additional support needed
- confirms with student that an appropriate referral has been obtained, if relevant; if not, makes arrangements with Occupational Health or other appropriate office to obtain appropriate referral
- ensures that contact with U of T WSIB Administrator has been made regarding a possible claim
- ensures completion and distribution of paperwork for claim, if relevant
- coordinates submission of paperwork for claim to U of T WSIB Administrator, if relevant

Subsequently

Student:
- attends follow-up referral and care as arranged
- complies with instructions from WSIB or other insurer regarding documentation required

Follow-up care provider:
- liaises with site of the accident/site of initial care regarding need and/or outcome of sample testing, initial treatment prescribed, etc.

Tracking

Academy Director:
- receives a summary of workplace incident reports for statistical tracking

Institutional response

All Academy Directors:
- Review incidents and make recommendations to address systemic issues.

Associate Dean, HPSA:
- Liaise with MD Program leaders to develop and implement recommendations/solutions

In the event that the exposure leads to a confirmed infection

Student:
- reports infection to Associate Dean, OHPSA or Academy

Academy Director:
- shares information with Associate Dean, OHPSA

Associate Dean, OHPSA:
- refers case to Expert Panel on Infection Control

Expert Panel on Infection Control:
- Determines next steps in accordance with Faculty of Medicine Guidelines regarding infectious diseases and occupational health for applicants to and learners of the faculty of medicine academic programs

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