Student Affiliation/Memorandum of Understanding
6050-02

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POLICY

Gwinnett Hospital System (GHS) supports clinical, technical, and academic education for affiliations that meet student, educational institution, physician, and Gwinnett Hospital System needs. An Affiliation Agreement between GHS, the academic institution, and physician (when applicable) must be current prior to placing the institution’s students at GHS. Students will only perform skills within their discipline’s scope of practice as defined by their academic institution and applicable laws and regulations.

DEFINITIONS

Affiliation Agreement: A legal contract signed by GHS administration and a participating academic institution. This agreement may also be between the school, GHS and a physician for a mid-level student. May also be referred to as a Memorandum of Understanding (MOU).

Clinical Student: A student that will be involved in patient care or have access to specific patient records.

Due Cause: reasonable suspicion that an Instructor/Student is under the influence of alcohol or drugs such that ability to perform the duties of the job MAY be impaired.

Drug/alcohol screening: Analysis of blood, urine, or other specimens provided by the student for testing.

Educational Institution: School. Must be accredited by a recognized accrediting authority.

GHS Student Placement Coordinator: A Learning Resources associate who is responsible for all student placements within GHS, not including medical student placements.

High School Programs: Facilitated and supervised activites designed for high school students in Gwinnett Public School system to acquaint students with healthcare professions. May include lecture, tour, clinical shadowing/observing. Programs include Quest Intern and Maxwell Patient Care Technician program.

Instructor: A faculty member from an affiliated educational institution who provides direct supervision of students placed in GHS facilities.

Visiting Instructor: A faculty member from an affiliated educational institution who visits periodically to indirectly supervise their student/s progress in the GHS hospital/clinic setting.
**Mid-Level Students:** Student that is obtaining an advanced degree in a discipline that allows for prescriptive authority or care of a patient that requires the supervision of a physician.

**Non-Clinical Student:** Student that will not be involved in patient care, or have access to specific patient information. Examples may include legal, research and business students.

**Preceptor:** A GHS associate who meets criteria for a Preceptor in their assigned area as defined in Policy 6050-04 Preceptorship. For Mid-Level students the physician is responsible for precepting or delegating the preceptor role to his appropriate staff.

**Program Coordinator:** A faculty member from an affiliated educational institution who works with GHS’s student placement coordinator in Learning Resources (LR) and a department-based education coordinator/department director to place students in designated areas. Program Coordinators may not provide direct supervision of students in assigned areas, but are available as a resource to the student, instructor, physician and preceptor.

**Student Coordinator:** A GHS associate who is responsible for placement of students in a department of the hospital system.

**Student Log:** Document that summarizes detail of student experience and necessary student orientation documents completed.

**Under the influence:** The faculty or student is affected by a drug or alcohol or the combination of drugs and alcohol as defined in Policy 300-502 Drug/Alcohol Abuse.

**PROCEDURE/GUIDELINE**

A. **Student Request**

1. All student requests including observations, with the exception of physicians, must be directed to the GHS student placement coordinator in Learning Resources.

2. The GHS student placement coordinator will initiate and ensure compliance with placement processes.

B. **Affiliation Agreements**

1. GHS has a signed current affiliation agreement with an educational institution prior to allowing any students to perform any clinical or patient care duties at the hospital.

2. Non-Clinical students may not require an affiliation agreement determined on a case by case basis, dependent upon the type of activities to be performed during the student placement.

3. Three way affiliation agreements are required for mid-level students to include the educational institution, GHS, and the supervising physician (unless physician is also a GHS associate in
which case an affiliation agreement is between the educational institution and GHS).

C. GHS LR Responsibilities

1. LR completes and routes the affiliation agreement to Corporate Compliance for recording and filing.

2. LR in conjunction with the department education coordinator/director coordinates student placement in any GHS facility.

D. Medical Staff Office

1. Physicians and Affiliated Staff credential through the GHS Medical Staff must meet criteria established by GHS Medical Staff for medical student affiliation, clinical rotations and case observation. Refer to Policy 520-54 Affiliate Staff and Non-Physician Practitioners.

E. Instructor and Program Coordinator Responsibilities

1. All Program Coordinators
   
a) Program Coordinators are responsible for screening each student in regards to required orientation materials, and completing the student log to turn into the student placement coordinator prior to student experience along with Board of Regents or Non-Board of Regents documents, i.e. Authorization for Release of Records and Information, Educational training Program Agreement and for Non-Board of Regents schools Agreement Concerning Faculty Supervision of Education Training Program. Orientation materials will be maintained by the school to be produced on request from GHS. Random audits may be performed by GHS.

   b) Program Coordinators communicate the following information to the GHS Student Placement Coordinator at least two weeks prior to the scheduled learning experience:
      
      1. Course description pertinent to the student placement.
      2. List of mid-level performance skills to be supervised by the physician, if a mid-level student.
      3. Student Log and Board of Regents or Non-Board of Regents documents as appropriate.

2. All Instructors
   
a) All instructors involved in patient care, this does not include Visiting Instructors, will have or show proof of drug/alcohol screening and background check that meets the GHS criteria prior to beginning any clinical rotation in any of the GHS facilities. The cost is the responsibility of the program/instructor coordinator or educational institution. Once instructors have successfully cleared the GHS requirements, results will be valid throughout their services at GHS and if in accordance with their employing academic institution. However, when an instructor changes employment to another academic institution, drug and background screening will need to be redone.
b) If GHS associate suspects that an Instructor/Visiting Instructor is impaired, they are removed from the clinical area, and the school is notified. GHS reserves the right to test for due cause.

c) Instructors/Visiting Instructors must complete the GHS appropriate orientation process and required facility-provided training.

d) Instructors/Visiting Instructors must abide by GHS dress code and wear school identification while on campus and GHS instructor identification badge. The Instructor/Visiting Instructor must also insure students under their direct or indirect supervision abide by GHS dress code and wear school identification while on campus and GHS student identification badge.

e) Instructors/Visiting Instructors are responsible for obtaining student identification badges by completing and taking Student ID Card Access Control Forms to Security. Student ID cards do not provide unrestricted access to infants or children. Identification badges also give access to appropriate student parking as needed. Student ID badges are collected and returned to Security at the completion of student placement. Refer to Policy 100-32 Identification Badges.

3. Nursing Instructors

a) The ratio of nursing instructors to students does not exceed the Standards of the Board of Nurse Examiners or Board of Vocational Nurse Examiners for the State of Georgia.

b) Each nursing instructor submits a copy of his/her current Georgia License, and current Basic Cardiac Life Support (BCLS) card at the beginning of each academic year. LR maintains a file for these licenses and BCLS copies.

c) New nursing instructors must complete orientation materials, complete computer based learning modules, and skills validation for core clinical skills and any additional unit skills they will supervise.

d) New nursing instructors or nursing instructors new to a nursing unit complete a minimum of four hours precepted time in the assigned area prior to clinical supervision of students. Specialized areas may require additional precepted time of the instructor.

e) All nursing instructors annually update/validate core GHS mandatory requirements. Nursing instructors supervising clinical groups will update GHS mandatory requirements and validate unit-specific competencies for their area(s). The nursing instructor must be available at all times while students are on GHS campus. The nursing instructor must be on the unit with their assigned clinical group unless a student from their clinical group is assigned to an associate in another area for an observation experience.

f) The nursing instructor is responsible for orienting, supervising, and coordinating the students’ learning activities.

4. Instructor/Program Coordinator annual affiliation meeting
a) An annual meeting is held each Spring for GHS Nursing and academic program representatives.

b) The purpose of this meeting is to discuss:
   1. Clinical learning experiences
   2. Policy and process updates
   3. Opportunities to improve the learning experience.

F. Specific Requirements

1. Therapeutic Recreation and Speech Language Pathology students must submit an application and interview before placement determination. The Rehab education coordinator coordinates these activities.

2. Clinical Pastoral Education residents submit applications to the contracted accredited Accredited Chaplaincy Pastoral Education (ACPE) center and are interviewed by GHS Chaplaincy Department members and ACPE center instructors prior to clinical placement.

3. Seminary students must be admitted and enrolled in an accredited theological seminary and participating in a clinical placement course of the seminary.

G. All GHS Education Coordinators

1. The department-based Education Coordinators serve as resources to students, preceptors and educational institutions.

2. All GHS Student Coordinators must follow the Student Placement Process.

H. General Student responsibilities

1. Must comply with all GHS policies and procedures during rotations.

2. Must be cleared by the Academic Institution with proof of health screening and immunizations prior to beginning any clinical rotation in any of the GHS facilities.

3. Must wear a school identification badge, and GHS student badge at all times while on hospital property.

4. Must receive basic orientation to GHS, and departmental orientation prior to entering area of rotation.

5. Must be validated by instructor or preceptor prior to performing glucose monitoring. Students use the instructor or preceptor code number when performing glucose monitoring.

6. Must never offer treatment to a patient or perform a procedure without qualified personnel present to assist/instruct.

7. Must have proof of drug/alcohol screening and criminal history check that meets
GHS criteria prior to beginning any clinical rotation in any of the GHS facilities; including clinics and physician group offices. The cost is the responsibility of the student or educational institution except for Maxwell High School of Technology and Quest Intern Students. However, when students change to another academic institutions program drug and background screening will need to be redone.

8. If a GHS associate or instructor suspects a student is impaired, the student is removed from the clinical area. The instructor will follow the policies of the academic institution. GHS retains the right to test for due cause.

9. Students who document on the patient care record must insure that the documentation reflects the student’s identification as a student and is co-signed by licensed personnel. Exception: Seminary and/or Clinical Pastoral Education students may document without co-signature.

10. When students are precepted by GHS Associates, an authorized Associate will take a completed Student ID Card access Control Form and accompany the student to security for an identification badge. These cards will also give access to appropriate student parking as needed. Refer to policy 100-32 Identification Badges.

11. Students are dismissed for a variety of reasons which may include:
   a) Unmet contractual requirements.
   b) Drug/alcohol impairment.
   c) Failure to respect patient privacy and confidentiality.
   d) Failure to maintain a safe clinical environment for themselves, patients, visitors/staff.
   e) Unsupervised clinical care.
   f) Corporate compliance violation.
   g) Inability to remediate to expected competency levels.
   h) Failure to abide by the policies of GHS.

ATTACHMENTS
None

FOR MORE INFORMATION CONTACT
Learning Resources

APPROVAL BODIES
Director of Learning Resources
SR VP of Human Resources

KEYWORDS
Students, academic, contracts, agreements, education, preceptor, mid-level, nurse practitioner, physician assistant