I. SCOPE / PURPOSE

This policy applies to all Novant Health facilities and sets out the requirements that a student must meet in order to participate in an educational observation experience. Maximum number of hours for observation cannot exceed 160 hours.

II. POLICY

Prior to entry of students into Novant Health (NH) facilities, a current agreement must be in place with the student’s educational institution out.

A. **Who is eligible to participate in an observation experience.**

Students must be at least 16 years old and sponsored by their school or immediate family (spouse or partner mother, father, brother, sister, children, and step children) of our team members and providers.

High school students may not observe in the following areas due to the nature of the services provided:
- Behavioral Health
- Laboratory
- Labor and Delivery or areas where OB.GYN exams are being performed
- NICU during FLU visitation restriction

B. **Coordination of Observation Experiences.** General requests for observation may be directed to the NH Student Programs Team to help facilitate the request appropriately.

III. QUALIFIED PERSONNEL

- Students sponsored by school
- Immediate family of our team members and providers

IV. EQUIPMENT
V. PROCEDURE

The procedure serves as a guideline to assist personnel in accomplishing the goals of the policy. While following these procedural guidelines personnel are expected to exercise judgment within their scope of practice and/or job responsibilities.

A. Student Programs Responsibilities

1. Student Programs shall:
   - Manage educational institution requests for observation experience;
   - Assure that a current, signed agreement is in place between the requesting educational institution and the NH facility prior to student placement or direct the educational institution in obtaining an agreement;
   - Manage information as needed related to student observation experience
   - Refer educational institution faculty or team member to the NH student programs website for regulatory requirements that must be submitted.
   - Collect, review, and approve the student requirements then issue clearance notice to school contact and/or team member as appropriate
   - Collaborate with the faculty, NH team members and student to resolve any student concerns.

2. NH preceptor Responsibilities

   The NH preceptor shall:
   - Assure student has been issued clearance to begin the observation experience.
   - Communicate schedule to student and/or educational institution
   - Perform role responsibilities as student observes their work;
   - Review and discuss students learning objectives
   - Assist students as appropriate to integrate the learning experience into business/professional practice;
   - Provide continuous personal supervision of the student. Assure student adherence to observation experience agreement (hyperlink observation experience agreement)
   - Serve as a role model for positive customer relations;
   - Refer problems, questions or concerns related to students or observations experience to the NH student programs;
   - direct student in event of emergency;
   - document observer in Electronic medical record

3. Educational Institution Responsibilities and NH team member or provider

   The Educational institution and NH team member shall:
   - Identify and secure a preceptor for student
   - Communicate with the student programs team regarding educational needs;
   - Provide signed letter of agreement and documentation listed on the
The student shall:
- Complete all requirements as listed on student programs website (www.novanthealth.org/studentprograms);
- Abide by all NH policies and procedures;
- Remain in the presence of NH staff at all times;
- Wear identification when in NH facility;
- Follow the observation experience agreement (Addendum A)

B. Observation Experiences in Operating Rooms. The following rules are in addition to those set out above.
1. The responsible surgeon must give approval for the observer to be present.
2. Written patient consent for the observer's presence must also be obtained on the Novant Health Operation, Procedure or Treatment Consent form. The observer will not be allowed to observe if the patient does not consent.
3. The observer will follow standards for proper OR attire and follow aseptic principles and sterile techniques.
4. The observer’s name is documented in the peri-operative record.

C. First aid or emergency care. If an observer is involved in an accident on Novant Health property, Novant Health will provide access to first aid or emergency care, as necessary and appropriate. If the observer is seen in the Emergency Department, he or she will be charged normal Emergency Department fees. Novant Health is not responsible for any charges related to first aid or emergency care given to the observer.

D. Observer status as non-employees. Observers are not, and will not be treated like, an employee of any NH facility for any purpose, including federal or state tax, employment benefits, unemployment or workers' compensation purposes. Observers are not entitled to any benefits, form of payment or stipend or the like from Novant Health during the observation experience.

E. Who is not covered by this policy. Non NH—employees, Work experience students and vendors are not covered by this policy. Please refer to the appropriate policies for guidance.

. VI DEFINITIONS

Student: an individual enrolled in high school or post-secondary education institution.
**Observation experience**: An educational opportunity to watch a NH team member/provider perform role-related responsibilities. The student is a passive observer and does not participate in actual role duties.

**Preceptor**: The NH team member or provider at NH facility or clinic who has agreed to allow the student observe.

**Provider**: Healthcare provider in any NH clinic or has privileges at a NH facility or clinic.

**VII RELATED DOCUMENTS**

- Letter of Agreement between Novant and Schools
- Novant Health Non-Employed Workers policy
- Novant Health Post Secondary Students Educational Experience policy
- Novant Health High School Students Educational Experience policy
- Novant Health Vendor Representative Policy and Visitation Guidelines

**VIII REFERENCES**

N/A

**X. SUBMITTED BY**

Director of Student Programs

**XI. KEY WORDS**

Student, Observation, High School Students; Student shadowing, shadowing

**XII. INITIAL EFFECTIVE DATE** 4-12-1999

**DATES REVISED**


**DATES REVIEWED**


**Date Due for Next Review** January 2022
**SIGNATURE SHEET**

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**APPLIES TO**

Novant Health: BMC, FMC (FMC main, CMC, KMC & all other locations), HMC, MMC, MPH, MHMC, PMC (PMC main, COH & all other locations), RMC, TMC, NHMG, Freestanding Imaging Centers, Freestanding Surgery Centers, Rehabilitation Centers, Pharmacy Services, Corporate Departments and Entities, Foundations, Auxiliaries, and Finance Focused NH UVA: HAMC, PWMC, Caton Merchant House, Cancer Center, NHMG, Prince William Foundation, Prince William Health Physician Services

**ACTION** Revised

**APPROVED BY:**

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<tr>
<td>Sr Dir Corp Organization Dev</td>
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<tr>
<td>Sr VP Human Resources</td>
<td>Janet Smith-Hill</td>
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**COMMITTEES APPROVED BY:**

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<td>NHMG Physician SVP &amp; Market Presidents</td>
<td>Andrew Mueller, Stephen Motew</td>
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Addendum A

**NOVANT HEALTH OBSERVATION EXPERIENCE AGREEMENT**

Novant Health facilities allows students to participate in observation experiences in an effort to achieve educational objectives and/or promote interest in careers in healthcare. In order to protect the safety and welfare of the patients and team members, as well as myself, I agree as follows:

- I will treat patients, visitors, Novant Health team members and physicians with respect. Patients have the right to refuse to allow me to observe their care and I will honor that.
- I will cooperate with the Novant Health preceptor in arranging the dates, times and length of my observation experience.
- I will not touch any patient or equipment. I will not counsel or give a directive to any patient. I will not perform, or help perform, any patient care activity.
- I will follow the *Confidentiality Agreement* and hold all information I learn about patients in strict confidence.
- I will follow the direction of my preceptor and remain with them at all times.
- I will work with my preceptor and others to make sure that my observation experience is successful.
- I will observe proper hand hygiene and other infection control measures.
- If I have a fever, cough, or think I may be ill, I will call the department where I am scheduled to observe and cancel my observation experience.
- I will follow the *Faculty and Student Dress Code NH HR 6026 policy* and will wear an Identification Badge prominently at all times during my observation experience.
- I will be on time.
- I will be responsible for any meal break fees, and parking fees.
- In the event I am involved in an accident on Novant Health property, Novant Health will provide access to first aid or emergency care. If I am seen in the Emergency Department, I will be charged normal Emergency Department fees.
- I am responsible for my own actions while I am participating in the observation experience, including any negligent or intentional acts that may result in a claim against a Novant Health team member or facility.

Observer Signature __________________________ Date ____________

Parent/Guardian Signature (if Observer is a minor) ____________ Date ____________

Observer Printed Name ____________________________ Parent/Guardian Printed Name ____________________________