

Hampton Roads Market - Shadowing Application

Definition of an Observer: An observer is anyone who accompanies a physician or a Bon Secours employee to watch patient care and/or procedures related to patient care. As such, the following rules apply:

- Must be 18 years old (exception for high school students with an observation requirement. 16 years of age is minimum age requirement)
- All individuals must be 18 years of age to enter the operating room
- May not spend more than **16 hours** total in Bon Secours facility per year (If additional hours are needed, submit proof of school requirement)
- May not touch patients or participate directly in procedures or patient/care treatment activities
- Must maintain a distance of **six feet** from patients when possible
- Must remain with the designated preceptor at all times while with a patient

CURRENT Bon Secours employee instructions:

- Online application **MUST** be completed at the following link:

<https://www.volqistics.com/appform/1810755722>

(Only submit online application ONCE. If returning, email us instead at BSHR-AcademicAffairs@bshsi.org)

After completing online application, you **MUST** submit the following compliance documents:

- Copy of Bon Secours Employee Badge
- Copy of Photo ID (such as: driver's license, school ID, passport)
- Photo (headshot facing forward with no background)
- Signed Observation Agreement (**page 14**)

NON-Bon Secours employee instructions:

- Online application **MUST** be completed at the following link:

<https://www.volqistics.com/appform/1810755722>

(Only submit online application ONCE. If returning, email us instead at BSHR-AcademicAffairs@bshsi.org)

After completing online application, you **MUST** submit the following compliance documents:

- Copy of Photo ID (such as: driver's license, school ID, passport)
- Photo (headshot facing forward with no background)
- Proof of Flu Vaccine (during flu season)
- Proof of COVID-19 Vaccine (Strongly recommended – Not Required. Document *must list type of vaccine administered*)
- Fully completed student vaccination-titer form checklist (**page 4**)
 - Follow instructions for requirements listed on (**page 3**)
- TB Screening Questionnaire (**page 5**)
- Shadowing/Observation Orientation – signature page at the end of the reference booklet (**page 13**)
- Signed Observation Agreement (**page 14**)
- Parental Consent Form (if under 18 years of age) (**page 15**)
- Proof of shadowing requirement (if under 18 years of age) Letter from school.

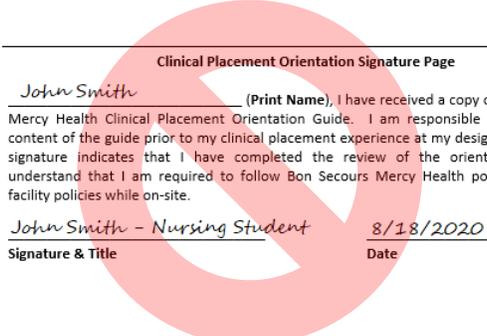
All required documents must be completed and submitted via e-mail to the Office of Academic Affairs at BSHR-AcademicAffairs@bshsi.org at **least 2 weeks** before your shadowing experience begins.

You will NOT be allowed to be on-site without completing the required compliance documents, obtaining approval, and receiving a badge from the Security Offices.

You will receive an approval badge that must be always worn while on-site during your observation/shadowing experience.

The Office of Academic Affairs **does not accept typed-in signed documents**. Please print out & hand sign all documents.

Once you and your preceptor have agreed to a start date, you will need to provide the Office of Academic Affairs with your start/end date. You will receive an approval badge that must be worn at all times while on-site during your shadowing experience.



Clinical Placement Orientation Signature Page

John Smith (Print Name), I have received a copy of Mercy Health Clinical Placement Orientation Guide. I am responsible for the content of the guide prior to my clinical placement experience at my designator. My signature indicates that I have completed the review of the orientation guide and understand that I am required to follow Bon Secours Mercy Health pol facility policies while on-site.

John Smith - Nursing Student Signature & Title 8/18/2020 Date

Prior to completing this application, please read over the requirements of an Observer below. Ensure you understand and can meet the following requirements:

Definition of an Observer: An observer is anyone who accompanies a physician or a Bon Secours employee to watch patient care and/or procedures related to patient care. As such, the following rules apply:

- Must be 18 years old (exception for high school students with an observation requirement and junior volunteers approved within the last 6 months. 16 years of age is minimum age requirement)
- All individuals must be 18 years of age to enter the operating room
- May not spend more than **16 hours** total in Bon Secours facility per year (If additional hours are needed, submit proof of school requirement)
- May not touch patients or participate directly in procedures or patient/care treatment activities
- Must maintain a distance of **six feet** from patients when possible
- Must remain with the designated preceptor at all times while with a patient

Mandatory Time Logging

- While on site, **Time Logging** through VicTouch is **MANDATORY**. Failure to log time may result in the ending of your shadowing experience early and being declined for future experiences through Bon Secours Mercy Health. Time logging instructions are included within this instructions packet.

**Compliance Requirements for Shadowing Experience
How to complete the Vaccination-Titer Form**

Health record showing immunizations or immunity. This may be provided by either proof of vaccination or a positive titer result—you do not need both. A titer is only required if you do not have proof of the required vaccination but believe you received it. In that case, your medical provider can order a titer to show proof of immunity and provide the results in place of a vaccination record.

- Proof of immunity to measles, mumps, and rubella either by 2 documented MMR vaccines and or positive titers to the diseases
- Proof of immunity to varicella by either 2 Varivax vaccines or a positive titer. We do not accept verbal history.
- Proof of immunity to hepatitis B if position has potential to come in contact with blood or body fluids is recommended.
- Documentation of a Tdap vaccine as an adult
- Documentation of COVID-19 vaccine - Strongly recommended, not required.
- Documentation of influenza vaccine during flu season
- Documentation of only one of the following to cover TB requirement:
 - tuberculin skin test (TST) completed within last 3 months of intended start date)
 - or Documentation of TSPOT TB blood test done within last 12 months
 - or Documentation of QuantiFERON Gold TB blood test done within the last 12 months
 - or a negative chest X-ray completed within the last 3 years

You may submit a copy of your vaccine records in lieu of a provider’s signature on The Vaccination-Titer Form, but you must still complete the form based on your vaccine records, on the signature line write “Vaccine Records Provided”

Bon Secours Richmond/Hampton Roads Vaccination-Titer Form

Requirements for Students/Observers (Please Print):

Student Name: _____ **School:** _____

Email: _____

Address: _____

Bon Secours Preceptor Name (print): _____

- Vaccines: MMR #1 _____
- List date given MMR #2 _____
- *Hepatitis B Series #1 _____ N/A
- Hepatitis B Series #2 _____ N/A
- Hepatitis B Series #3 _____ N/A
- Varivax #1: _____
- Varivax #2: _____
- Tdap: _____
- Flu Vaccine: _____
- COVID Vaccine: _____ N/A
- TB screening test: **TST 1st _____ Result: _____ N/A
(only 1 option required) ** TSPOT: _____ Result: _____ N/A
 QuantiFERON Gold _____ Result: _____ N/A
 *** CXR _____ Result: _____ N/A

TST within last 3 months
Plus, Annual TB form

- Titers: Rubella: Date: _____ Result: _____
List date titer drawn. Rubeola: Date: _____ Result: _____
- Mumps: Date: _____ Result: _____
- Varicella: Date: _____ Result: _____
- Hepatitis B: Date: _____ Result: _____ N/A

Healthcare Provider Signature

Date

E-mail/phone number

**** Shadowing students only need one within 3 months before start date.**
***** Chest x-ray is only necessary if the TB test or TSPOT are found to be positive.**

employee health

Employee Wellness Services: EAP, Wellness, Employee Health

TB Screening Questionnaire
IF YOU ANSWER YES TO ANY QUESTIONS,
YOU MUST REPORT TO EMPLOYEE WELLNESS IN PERSON

PRINT Student Name	Facility placement will be in	Full Social Security #			
School	Phone #				
TB History					
	NO	YES		NO	YES
Previous positive TB Skin/Blood Test?			Are you being treated for a serious medical condition?		
If yes, were you treated with medication?			Are you taking steroids or chemotherapy?		
If yes, what is the date of your last chest x-ray?					
In the last 12 months, have any of the following occurred?					
	NO	YES		NO	YES
Chronic cough (3 weeks or longer)?			Coughing up blood?		
Chronic fatigue (tiredness)?			Persistent night sweats? (not hormonal)		
Fever, chills?			Unexplained weight loss?		
In the past year, have you been to a foreign country? If yes, where? _____ Length of stay: _____ Date returned to the US: _____ Purpose of trip? Visit family: _____ vacation: _____ mission: _____ other: _____			In the past year up to present have you been in close contact with a person, without you wearing PPE, who has been diagnosed with active TB? If yes, where: at work: _____ name of patient: _____ in your home: _____ in the community: _____ Other: _____		
If you answered yes to any question above, please explain and report in person to Employee Wellness.					
Have you had a job title change in the last 12 months? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, please print your current job title:					

Student Signature: _____ Date: _____
EWS Reviewer: _____ Date: _____
Follow-up Recommendations:

BON SECOURS MERCY HEALTH

Shadowing/Observation Orientation Reference Booklet



This booklet contains a summary of policies, procedures, and other information to make your career exploration or job shadowing experience successful. This reference is a study guide and is required reading to assist observers in completing their BON SECOURS orientation requirements.

Career Exploration & Shadowing Policy & Procedure Reference Guide

The following pages provide a summary of pertinent information needed by observers to complete their orientation requirements as set forth by The Joint Commission. THIS IS A REFERENCE GUIDE ONLY.

For a complete and accurate version of any policy or procedure please see your program advisor or preceptor.

This booklet is divided into themed sections:

- First is Our Call to Serve with Excellence, covering the Bon Secours Mission, Vision, Values, and service guidelines for providing world class service.
- Second is our section on Safety Awareness, reviewing the various emergency procedures, infection control policies, and other safety protocols that you should follow as a student.
- Finally, the third section, frequently asked questions (FAQ), will provide you with basic information about dress code, etc.

After reading this material, please feel free to ask questions for clarification of any issue you may not understand.

Our Values

We pursue our mission guided by our values: Human Dignity, Integrity, Compassion, Stewardship and Service. All staff is expected to demonstrate a commitment to our values. The following behaviors grow from our values and are applied every day to achieve world class excellence.

Professionalism: Is how we show respect to all customers and co-workers by appearing as a professional at all times. You show this by adhering to the dress code, using professional language when speaking with patients and visitors, and following professional business etiquette when in the office. Also, by following other professional standards when entering patient rooms or otherwise interacting with visitors.

Cultural Diversity: Bon Secours is committed to actively pursuing knowledge, understanding, and acceptance of our diverse employees, patients, customers, and business relationships. We strive to respect and honor these differences by developing systems, structures, and processes to support a diverse workplace. One such service is the Cyacom language phones are used at hospitals for language. A Cyacom computer is used for deaf or hard of hearing. In addition, care managers and nursing supervisors have the ability to contact certified interpreters for the hard of hearing. All requests for interpretation should be routed through the attending nursing unit or the doctor's office the patient is visiting.

Confidentiality: Respect for a patient's right to privacy is a moral and legal obligation for all hospital staff. Observers should never discuss patient information while in the hospital or after you leave. We must regard as sacred, any and all information obtained either directly or indirectly (through listening and/or reading). Anything you learn about patients during the course of your program experience must be kept confidential, including information concerning who is admitted to the hospital. Breach of confidentiality could result in your immediate dismissal as a program participant.

You may hear confidentiality referred to as protected by HIPAA. HIPAA is an acronym for Health Insurance Portability and Accountability Act, a federal law enforcing patient confidentiality and how a health care provider may use or disclose a patient's information. HIPAA affects all Bon Secours employees, volunteers, and observers

who come into contact with health information that is individually identifiable. Individually identifiable information is information created or received by anyone at a Bon Secours facility that relates to the past, present, or future physical or mental health condition of an individual. Examples of individually identifiable information include patients name, diagnosis, procedure, dates of service, address, telephone number, and any other information someone could use to identify a patient. This means that you cannot tell anyone (friends, neighbors, church members, volunteers, staff-anyone) that someone is a patient at any of the nine Bon Secours facilities without the patients consent. Any breach of patient confidentiality is potentially punishable by fines to Bon Secours and possibly to the individual responsible.

Social Networking: No information pertaining to or about the shadowing experience is permitted on social networking sites.

Patient Rights, End of Life Decisions, and Ethics Consultations: Patients have the right to fully participate in communication involving their healthcare. Questions from patients and/or their families regarding a breakdown in communication should be referred to the Patient Advocate. If patients or their families wish to make end of life decisions (Living Will, Medical Power of Attorney, etc.), they should be referred to the Chaplain. Pastoral Care or the Patient Advocate will be happy to facilitate an ethics consult for patients and/or their families if one is requested.

Age Specific Training: As observers engage in activities throughout the facility, they come into contact with people of all ages. Please keep in mind that special care should be taken to assure that communication with each age level is appropriate in order to assure compliance with policies and to make sure people clearly understand instructions or direction.

Patient Satisfaction: As a program participant you may have the opportunity to interact with patients and their families. Please let a staff member know of any occurrences or incidences that are reported to you or observed by you. We want to address negative experiences or concerns wherever possible.

Fundamentals of Customer Service: In addition to the three steps of service and the service experience as outlined in our credo cards, Observers should always follow the (5) Fundamentals of Customer Service, known briefly as AIDET:

Acknowledge

- Pause and knock before entering
- Smile, make eye contact, and greet everyone in the room with a warm smile

Introduction

- Who you are and what your role is
- Acknowledge wait time, if applicable, and provide genuine apology if there have been any delays
- Use appropriate touch

Duration

- Let them know how long what you are doing will take-help set their expectations (procedures, results, exams, etc.)
- Overestimate time
- Explain *typical* duration times
- Update when time expectations change

Explanation

- What and Why as it relates to critical aspects of care of tests/treatment, medications, pain management, discharge info

- Ask what questions they have for you or ask them to repeat back some of the important information so you ensure they understand

II: SAFETY AWARENESS

The Safety and Security Department

There are four basic goals of hospital security:

- Personal protection-patients, visitors, employees, volunteers, and observers must be kept safe throughout the facility and hospital grounds. Security provides identification badges to be worn by all employees, volunteers, and contractors. Students in both Richmond and Hampton Roads market will get badges from the Office of Academic Affairs.
- Property Protection- Theft of hospital property such as drugs, medical supplies, linens, office supplies, equipment, and personal belongings must be prevented.
- Facility protection-Buildings and grounds need to be protected against vandalism, improper access, large-scale threats, and improper use of grounds.
- Parking and Traffic Control-Smooth hospital operations depend on clear emergency lanes, parking security, access for people with disabilities, and ample parking space for patients, visitors, volunteers, and employees

Follow these basic rules:

- Wear your ID badge at all times
- Observe smoking rules. Bon Secours is SMOKE FREE!
- Stay out of restricted areas
- Leave valuables at home
- Do not leave your personal belongings unattended
- Report missing property immediately to Security
- Be alert and report disturbances, suspicious activities or unsafe conditions
- Understand the importance of security in the hospital and be responsible for following hospital rules

Accidents, injuries, and Other Occurrences:

Observers, who are injured while at one of the Bon Secours facilities, should report the injury to their preceptor or other available staff immediately. If you become ill, please follow whatever procedure you would normally follow if you were at home (i.e. calling your physician if necessary or going to the Emergency Department.) If a patient or visitor becomes injured, please advise Security immediately. A written report will need to be completed by Security.

Emergency Codes:

The in-house emergency phone number for reporting a code is different at each facility. Your preceptor will provide you with the in-house number to call if there is an emergency. Provide the operator with your name and location and a brief description of the situation. You will receive a card with a list of emergency codes. Code Red is the overhead paging code for a fire. Please listen carefully for the location of the fire and do the following:

- Close doors and windows in your immediate vicinity
- Do not use the elevators until the code is cancelled
- Listen for additional instructions over the paging system
- Follow the instructions of staff in the area

You may also hear Code Red Drill. Follow the same procedure as for Code Red. Tests and practice drills are held periodically.

Each facility has a code for abductions (your preceptor will inform you of the code name).

When you hear this code called:

- Remain alert for suspicious persons with packages
- Guard all doorways/exits
- Do not physically detain any individual, but attempt to engage them in conversation until Security arrives
- Follow and watch suspicious persons and report behaviors to Security

Hospital Fire Safety:

In the event of a fire, it is important to contain the fire in one area, if possible, rather than evacuate the whole building. Be sure to know the location of the nearest fire alarm pull station and be familiar with the operation of the fire extinguisher in the unlikely event that a staff person is not in the area. If you are the first to spot the fire and there are no staff members around, please follow the **R.A.C.E** procedure:

Rescue patients in immediate danger.

Alert: Pull the alarm and call the emergency number provided by your preceptor. Tell the operator the location of the fire.

Confine, by closing all doors and windows, to isolate the fire. Note: Fire doors will automatically close throughout the hospital. Do not use elevators-use the stairs.

Extinguish a small fire using the fire extinguisher. If staff is present, allow them to use the extinguisher. If there is no staff present and you feel comfortable using the extinguisher, do the following **"PASS"** procedure:

Pull the ring

Aim at the base of the fire. (Stand 6' to 8' away)

Squeeze the handle to discharge the extinguisher

Spray in a sweeping motion until the fire is out

Hazardous Materials Communication:

Observers have a "Right to Know" what hazards they face in the work area and how to protect themselves against potential hazards. Hazardous materials can cause injury by inhalation, ingestion or topically (skin). All observers also have the "obligation to act safely." Your program advisor or preceptor can provide you with information about hazardous materials.

Infection Control:

Infection Control is the prevention and control of infections within our health care facility; The Occupational Safety and Health Administration (OSHA) has set a blood borne pathogen standard for all healthcare facilities to follow. The purpose of this standard is to "reduce occupational exposure to Hepatitis B Virus (HVB) and Hepatitis C Virus (HCV), Human Immunodeficiency Virus (HIV) and other blood borne pathogens, including malaria and syphilis that may be encountered in the workplace.

Hand washing is the most important means of preventing the spread of infection.

Standard precautions will be used by all observers, at all times, for all patients. These precautions include:

- Do not enter a room displaying a color-coded isolation sign without proper PPE. This includes rooms with signs indicating radioactivity
- Wash hands immediately after removal of gloves and upon entering and leaving each room

MSDS & What to do in Case of a Spill:

Report any spill to Housekeeping for clean-up assistance. If you are sure that the spill is a chemical or biological, report it immediately to clinical staff in the area due to possible contamination issues. Large chemical spills or leaks that occur in hallways, patient rooms, or on hospital grounds always require implementation of Code H. Material Safety Data Sheets (MSDS) provide detailed information regarding exposure and clean-up of chemical spills. MSDS information is available through a toll-free phone number posted on yellow labels on most unit telephones. Observers should not be involved in the clean-up of chemical or biological spills due to the necessary safety precautions that apply. However, you are encouraged to assist with non-hazardous spills especially if you make the mess!

Radiation Safety:

Bon Secours is committed to keeping radiation exposures as low as reasonably achievable (ALARA). Every activity involving exposure to radiation should be done so as to minimize occupational exposure to the individual and hospital population. Hospital sources of radiation include:

- Machines (diagnostic x-ray, cardiac cath lab, radiation therapy)
- Radioactive materials (injection or implants)
- Patients (after receiving injections or implants)

The risks associated with occupational exposures are smaller than the risks associated with most day-to-day activities.

Observers may visit areas utilizing machines which emit radiation. Patients who have received radioactive injections or implants pose the greatest potential danger to observers. Do not enter a patient room displaying the *Caution Radioactive Materials* sign.

Smoke-Free Policy:

All Bon Secours facilities and grounds are smoke free. The use of smoking materials is prohibited throughout the campus. Violation of smoking policies should be reported immediately to Security. Our primary mission is to protect the health of those in our community while promoting a culture of healthier living. Tobacco slows down the healing process. Even toxins left over on your clothes and body can make others sick. We understand that the decision to smoke or use tobacco products is a personal one. We ask that you refrain from smoking or using tobacco products on our campuses so that we can all be healthier.

Workplace Violence:

- Treat everyone with respect. Keep patients/visitors informed of wait times, procedures, etc. and provide frequent updates
- Report any incident- all threats and/or potential sources of trouble should be reported
- Trust your feelings- your instincts (feelings of uneasiness) are important warning signs
- Staying alert: try to spot trouble before it starts
- Always follow proper security procedures- wear your ID badge. If you see a person without an ID badge in a limited access area, notify Security

- Call for support at the first sign of trouble

Watch for verbal & physical signs of potential violence, such as:

- An angry or threatening tone of voice or shouting
- Making threats or sexual comments, cursing
- Challenging rules or authority
- Making unreasonable demands
- Talking about or having a weapon
- Nervous pacing, restlessness
- Clenching fist or jaw, tightly gripping objects
- Angry looks or staring
- Acting drunk or under the influence of other drugs
- Major change in appearance or habits

Respond to a threat or violence by calling security and reporting a code ATLAS. If you find yourself in a violent situation, do the following:

- Stay calm, stay alert-maintain your self-control
- Keep a safe distance from the person don't turn your back on them. Leave yourself an escape path
- Listen to the person. Be supportive
- Talk slowly and softly. Offer the person choices
- Avoid touching the person

III. FREQUENTLY ASKED QUESTIONS

What is joint commission? What do they require?

The Joint Commission is an independent, not-for-profit organization that sets the standard for accrediting healthcare organizations. Their website is www.jointcommission.org. The Joint Commission guidelines require that participants in a career exploration or job shadowing program receive an orientation that provides the participant with knowledge and skills of particular hospital policies and procedures.

What do I do if the weather is inclement on the day of my program or shadowing experience?

During inclement weather, please listen closely to the advisories given by the news media. If the County Public Schools are closed in the area you are scheduled to shadow/observe, or if you feel the roads are not safe for driving, do not attempt to come into the hospital.

Where do I park?

Observers are asked to park in the parking lot away from the building. Please do not park in the parking that is marked for patients.

What do observers wear?

Observers shadowing in the clinical area may wear business casual clothing, no jeans and closed toe shoes or scrubs, and an ID badge which will be provided to wear when in the clinical area. Dress should be appropriate to the setting as reflected in the Bon Secours Dress Code Policy HR-04. Clothing should be neat, clean, and in good repair.

Shadowing/Observation Orientation Signature Page

_____ (Print Full Name), I have received a copy of the Bon Secours Shadowing/Observation Orientation Guide. I am responsible for reviewing the contents of the guide prior to my observation experience at my designated facility. My signature indicates that I have completed the review of the orientation guide and understand that I am required to follow Bon Secours policies and specific facility policies while on site. I understand that my experience is shadowing only and I am not to participate in any patient care activities.

Signature & Title

Date

Parent/Guardian Signature (if under 18 years of age)

Observation Agreement

I acknowledge and understand that I may have access to proprietary or other confidential business information belonging to Bon Secours Richmond (BSR) or Bon Secours Hampton Roads (BSHR). In addition, I acknowledge and understand that I may have access to confidential information regarding Bon Secours BSR & BSHR employees, patients, and patient care. Therefore, except as required by my employer or by law, I agree that I will not:

- A. Access data that is unrelated to my job duties at Bon Secours; or
- B. Disclose to any other person, or allow any other person access to, any information related to Bon Secours which is proprietary or confidential and/or pertains to employees, patients or patient care.

“Disclosure of information” includes, but is not limited to, verbal discussions, FAX transmissions, providing hard copies, electronic message transmission, taking pictures of data, voice mail communication, written documentation, “loaning” computer access codes, copying sensitive or confidential information to unauthorized, unprotected electronic devices and/or other electronic transmission or sharing of data.

I understand that Bon Secours, its patients, staff, or others may suffer irreparable harm by disclosure of proprietary or confidential information and that Bon Secours may seek legal remedies available to it should such disclosure occur. Further, I understand that violations of this agreement, or any other Bon Secours policy regarding confidentiality, may result in disciplinary action, up to and including my termination of clinical experience. I understand that this statement is binding both during my clinical experience and thereafter.

I also understand that as a representative of Bon Secours, I must demonstrate ethical behavior and maintain professional boundaries with patients and their families both at work and outside work. Recognizing that my association with individuals outside work hours may be construed as work related, I shall be compelled to abide by confidentiality, integrity, conflict-of-interest, ethical, and legal considerations in representing Bon Secours at all times.

In exchange for authorization to participate in an observational experience at Bon Secours, I agree to:

- Provide confirmation that I have had a tuberculosis (TB) screening within the past 3 months and am free of TB to the best of my knowledge
- Read and follow the orientation instructions and any other materials provided by Bon Secours related to this experience
- Arrive punctually on the date of the experience and remain for the agreed upon time frame unless advance notice is provided
- Wear attire that is clean, neat, and modest in appearance
- Reschedule my observation experience if I have been exposed to any infectious conditions in the immediate 48-hours prior to the observation experience or if I am not feeling well the day of the experience
- Not touch patients or participate in any procedures or patient care/treatment activities
- Maintain a distance of six feet from patients when possible to reduce the risk of possible airborne infection transmission
- Remain with the designated healthcare professional at all times when in patient care/treatment areas and not enter rooms or offices without permission
- Keep patient personal and private information confidential (i.e, what I hear and see there will stay there)
- Not share any patient information verbally, in writing, through social media, or in any other format with others
- Not take pictures or videos of patients, staff, visitors, or others without written authorization in any patient care or treatment areas
- Comply with the rules and procedures of Bon Secours as instructed during this observation experience
- Not remove any forms, documents, equipment, materials, resources, or other items from Bon Secours without permission

Understanding that the nature of a healthcare environment can potentially expose me to emotional and physical trauma, infections, such as the flu, and dangerous equipment, I acknowledge that I am participating in this observation experience at my own risk and that Bon Secours is not financially or legally responsible for any injury or illness incurred as a result of this observation experience. Therefore, in consideration of the benefits to be derived from this experience, any and all claims against Bon Secours or any person working under its direction are hereby expressly waived.

Signature of Observer: _____

Date: _____

Minors Only-Parental Authorization – Shadowing/Observing

I give permission for my son/daughter, _____ to participate in a
Full Name (please print)
shadowing experience at Bon Secours _____. I release Bon Secours
Facility Name

_____ from all claims that may arise out of this observational experience. I
Facility Name

understand this is an observational experience only and no patient care will be given by my
son/daughter. My signature authorizes Bon Secours _____ to
Facility Name
act in an emergency, pending care in case of illness/injury.

During the shadowing experience I give consent for:

1. Treatment deemed necessary by the following physicians:
 - a. Doctor _____ Phone Number _____
 - b. Dentist _____ Phone Number _____
2. Treatment of the minor observer at a Bon Secours location, if the above physicians cannot be reached.

Parent/Guardian Name (print) _____ **Date:** _____

I, _____ (**student name**), agree to behave in a responsible and professional manner during my observation experience at Bon Secours _____ (**facility name**). I understand that I am an observer only and will not be permitted to render care of any kind.

Student Signature: _____ **Date:** _____

Parent/Guardian Signature: _____ **Date:** _____

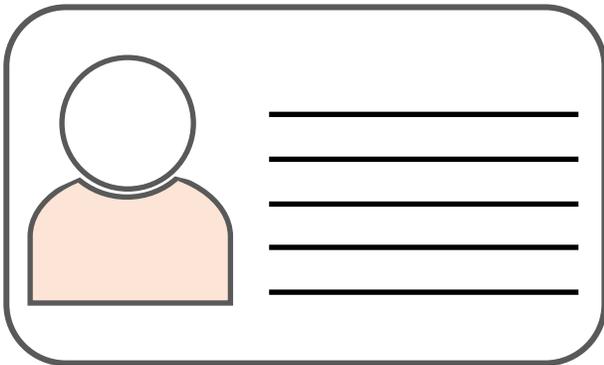
Headshot Photo Requirements

A headshot photo of yourself is needed for your application. Your photo will need to meet the following requirements:

- Clear color image submitted in either JPG, PNG, or PDF file format
- Facing forward with entire head & shoulders shown in photo
- Plain color background without objects
- Do not edit your headshot photo using obsessive filters or artificial intelligence to alter appearance



Copy of Photo ID Requirements



A copy of photo identification will need to be submitted along with your compliance paperwork.

Examples include:

- Driver's license or state ID
- Military ID
- Student photo ID
- Passport

VICTOUCH – Time Logging Student Guide for Students

Welcome to your Bon Secours Mercy Health experience. We are very happy to have you! This instructional document will assist you in logging your time spent within our facilities. VICTOUCH is connected to the same system that you filled out your online application with. Once you have completed your application & all compliance documents and it has been accepted, you will receive an e-mail giving you your student number to log in to VICTOUCH.

VICTOUCH allows you to log in and log out. To log into VICTOUCH you will need to go to the following link:

<https://www.volgistics.com/victouch/723648/168264694>

Be sure to bookmark this link so that you can easily access it in the future.

Student Information Center

You must select your **facility name & department** when logging your hours. If you do not see this listed once logged in, please contact us immediately at BSHR-AcademicAffairs@bshsi.org.

Bon Secours

Student Information Center

Welcome. The Student Information Center is where students check-in and out. If you are ready to check-in or out and you have a student PIN number (found on your student badge from Office of Academic Affairs), enter it here to get started.

1	2	3
4	5	6
7	8	9
#	0	➔

◀ Back Please select the facility/location you are current attending:

Click the button for your current site location. If you do not see your current location, please select 'Not Sure' & contact BSV-AcademicAffairs@bshsi.org with detailed facility/location name so we can add it to your list.

- 2 North: Medical, Surgical & Hospice Unit**
St. Mary's Hospital\St. Mary's Hospital
- Cath Lab**
Memorial Regional Medical Center\Memorial Regional Medical Center
- Emergency Department**
Richmond Community Hospital\Richmond Community Hospital
- I'm not sure

If you have any trouble accessing VICTOUCH please contact the Office of Academic Affairs at BSHR-AcademicAffairs@bshsi.org

VICTOUCH is strictly for logging in at the start of each rotation shift and logging out at the end of each rotation shift.

Bon Secours EMERGENCY CODE TERMINOLOGY STANDARDIZATION

Code Type	Current State	Approved Code
Medical Alert		
Adult Medical Emergency	Blue	Medical Alert + Code Blue Adult + Location
Pediatric Medical Emergency	99/Blue	Medical Alert + Pediatric Code Blue Pediatric + location
OB Medical Emergency	Obert	Medical Alert + Code Obert + location
Acute Stroke	S	Medical Alert + Code Stroke + location
Visitor Staff Medical Emergency	Orange/Green	Medical Alert + Visitor Staff Medical Emergency + location
Rapid Response Team	Rapid Response	Medical Alert + Adult Rapid Response + location
Rapid Response Team	Rapid Response	Medical Alert + Pediatric Rapid Response Pediatric + location
Delivery outside of L&D	White	Medical Alert + Code Delivery + location
STEMI	STEMI	Medical Alert + Code STEMI + location
Sepsis	N/A	Medical Alert + Code Sepsis + location
Malignant Hyperthermia	Hot/None	Medical Alert + Code Hot + location
Asphyxia	Ice	Medical Alert + Code Ice + location
Security Alert		
Active Shooter	None/Active Shooter	Security Alert + Active Shooter + location
ED Lockdown	None	Security Alert + ED Lockdown
Hospital Lockdown	Lockdown/Gold	Security Alert + Hospital Lockdown
Bomb Threat	B/Black	Security Alert + Code Black + location
Combative Patient/Visitor	Atlas/Grey	Security Alert + Code Atlas
Abduction/Missing Patient	A/L/Purple	Security Alert + Missing Adult/Child + descriptor
Abduction/Missing Infant	Amber/Pink	Security Alert + Missing Infant + descriptor
Facility Alert		
Fire	Red	Code Red + fire alarm + location
Disaster/Mass Casualty	D/Silver	Facility Alert + External Mass Casualty
Evacuation	E/None	Facility Alert + Evacuation +type + location
Hazmat	H/Yellow	Facility Alert + Hazmat + location
Utility Alert	U/Orange	Facility Alert + Utility Failure + descriptor + location
Technology Downtime		Downtime + Technology impacted
Weather Alerts		
Snow Plan	White/None	Severe Weather Alert + descriptor
Sever Weather	W/Brown	Severe Weather Alert + descriptor