The PPE Professional Practice Experience (PPE) Guide was developed by the PPE workgroup of the Council for Excellence in Education (CEE). The workgroup is composed of House of Delegates (HOD), CAHIIM, CCHIIM, workforce, and educator representatives. The PPE Guide specifically refers to the internship (paid or unpaid) or affiliation experience students undertake throughout their HIM academic program. The guide is divided into specific areas to provide information and best practices to students, academic faculty, or programs and HIM practitioners on the expectations for the PPE sites and PPEs. The underlying goal is for PPE sites, educational institutions, students, and practitioners to partner together to create a meaningful experience for all involved.
# Table of Contents

Letter from AHIMA’s President ........................................................................................................... 4
Introduction ........................................................................................................................................ 5
How to Use This Guide ....................................................................................................................... 7
Affiliation Site Guidance .................................................................................................................... 7
  Strategies to Ensure the PPE Is Meaningful .................................................................................... 7
  Organizations Serving as Affiliation-sites ......................................................................................... 8
  Considerations for Vendor and other Nontraditional PPE sites ...................................................... 8
  Preparing the Student Experience ................................................................................................... 9
  Getting Continuing Education Units for Credentialed Staff .......................................................... 10
Recertification Policy for Professional Practice Experience by the CCHIIM: ........................................ 11
Educator Guidance ............................................................................................................................. 11
  Curriculum Content ....................................................................................................................... 11
  Industry Needs ............................................................................................................................ 11
  PPE Syllabus .................................................................................................................................. 12
Student Guidance ............................................................................................................................... 12
  Introduction ................................................................................................................................. 12
  Preparing for the PPE .................................................................................................................... 12
  Student Responsibilities .................................................................................................................. 14
  Expectations On-site ...................................................................................................................... 14
AHIMA Code of Ethics ....................................................................................................................... 18
AHIMA Standards of Ethical Coding ................................................................................................. 18
Ethical Standards for Clinical Documentation Improvement (CDI) Professionals .................................. 18
Unpaid Intern Fact Sheet ..................................................................................................................... 19
Examples of Projects for Students .................................................................................................... 21
Affiliation Agreement Sample .......................................................................................................... 25
Special Thanks to These Contributors:

Cassandra A. Bissen, MS, RHIA, FHIMSS
Hertencia V. Bowe, EdD, MHSA, RHIA
Lynda A. Carlson, PhD, MPH, MS, RHIT
Marianne E. Dailey, RHIT, CHP, CPHQ
Gregory Davis, RN, MHIIM, RHIA, CDIP, CCS, CAHIMS
Lynn Elizabeth Edwards, MBA, RHIT, CHSP
Jayne J. Glines, RHIA, CCS, CPC-H
Leslie Gordon, MS, RHIA, FAHIMA
Leah A. Grebner, PhD, RHIA, CCS, FAHIMA
Evan T. Harmon, MHI, RHIA
Michele Mahan Smith, RHIA, CCS
Barbara J. Manger, MPA, RHIA, CCS, FAHIMA
Teresa T. Neal, MHA, RHIA
Geri Newman, RHIT, CHTS-IM
Karen R. Patena, MBA, RHIA, FAHIMA
Virginia K. Pitts, RN, RHIA
Elizabeth Rockendorf, MS, RHIA, CHPS, CHTS-IM
Kathleen Scott, RHIA
Heather Tudor, MBA, RHIA, CCRP
Nicole M. VanAndel, MS, RHIA, CHPS
Sheri L Vanderhoof, RHIA
Letter from AHIMA’s President

Student placement in the health information management (HIM) field, referred to as a professional practice experience (PPE) is a CAHIIM-accredited program requirement and an important part of student education. In addition, PPE is a catalyst too career development. Our goal is to develop and strengthen the professional workforce. In a time of academic growth, the call to members to help students realize the benefits of working in a professional environment for their PPE is increasingly important. HIM enrollment is expected to continue to increase, due to emerging program accreditations and greater recognition of HIM’s transformational power in healthcare through improvement of trusted health information. However, establishing PPE placements have also become challenging due to the evolving landscape of HIM without walls. HIM departments are no longer centralized in one facility; electronic documentation and health information exchange have made it possible for remote HIM professionals and practitioners to work from anywhere inside or outside of the facility.

PPE Site Mentors play a vital and rewarding role in training the next generation of HIM professionals by supporting academic programs and the HIM profession through participation in the PPE experience. As a result, practitioners can build mentor/mentee relationships, develop and recruit new talent for their organization, help reinforce what students learn from the classroom, and provide valuable exposure to healthcare professionals in a setting that allows them to grow and develop areas of personal expertise in HIM. In addition, the PPE experience affords credentialed AHIMA members an opportunity to earn up to ten (10) CEUs per recertification cycle, while demonstrating leadership and dedication to the profession.

Oftentimes, I find the best PPE experiences are at the busiest times (that is, during Joint Commission visits, system conversions, department moves, and so forth). Students find these firsthand experiences invaluable. Please consider extending an invitation to HIM students in your geographic area during peak and off-peak times—having an extra pair of hands to help out with special requests can be a tremendous benefit for both you and the student.

Each school program builds a link within the community through the development of an HIM Advisory Committee. Groups of HIM leaders are welcomed to have an active role in shaping the HIM program content and policies. Successful PPE experiences begin with building relationships and support from local practitioners. If you are not presently involved with an academic program (local or online) please consider registering as a site mentor at PPE Site Mentor Opportunity.

In this guide, you will find best practices for designing and hosting a PPE, along with PPE strategies and supportive tools. The 2017 PPE guide has been revised to include updated language and new additions such as:

- Student Manual
- Site Mentor Manual
- Examples of PPE projects and activities

I appreciate your review of the Professional Practice Experience Guide. If we each do our part, we can ensure HIM students receive a thorough orientation to their new profession, and that our HIM workforce grows smarter, more informed, and better prepared to deal with the emerging issues of HIM practice in the 21st century.

Kindest regards,

Ann Chenoweth, MBA, RHIA, FAHIMA
AHIMA 2017 President and Board Chair
Introduction
This guide uses the term professional practice experience (PPE) to refer to the practicum or affiliation, (also previously referred to as “clinical experience”) the student participates in throughout his or her HIM educational program. Each CAHIIM-accredited HIM program must have at least one PPE that helps students assimilate theory with practical application in order to work toward achievement of AHIMA entry-level competencies in a real-world environment.

This guide is intended to provide information and best practices to everyone associated with the PPE. The underlying goal is for PPE sites, educational institutions, and students to partner together to create a meaningful experience for all involved. Each HIM professional can contribute in a meaningful way to help support currently enrolled students. The importance of member participation is stressed in Article VI of the AHIMA Code of Ethics that states:

“Recruit and mentor students, staff, peers, and colleagues to develop and strengthen the professional workforce.”

Evidenced by faculty surveys, identifying and engaging a PPE site is increasingly difficult. While the PPE concept is widely deemed to be of great benefit to students, there are growing challenges to the concept. Some of these challenges are increasing numbers of programs competing for limited PPE placement sites, department and organization mergers, remote staff, and electronic system access issues. Varying legal interpretations about whether PPE students must be paid or not is as an issue as well.

Not only have challenges continued to grow at an even greater pace than the solutions, there is also significant variation in PPEs today. To help PPE affiliation sites with variations in student experience and depth as they come into a PPE, the PPE Workgroup is providing additional supporting materials to help establish a strong baseline of HIM competencies for all students. Faculty, students, and practitioners must continue working together to create opportunities that expose students to practice-based learning.

The on-site PPE:

- Exposes students to the evolution of roles and technology that have not yet reached program curriculum, giving them clearer insight to necessary competencies in the changing environment;
- Gives students a context for pursuing lifelong learning and professional growth;
- Gives HIM staff at the affiliation site the opportunity to engage with students and perhaps consider their own professional growth through education and certification;
- Provides the site mentor with an opportunity to evaluate, and provide feedback to, the educational program on program effectiveness based on student strengths and weaknesses.
Defining the PPE

PPE is a CAHIIM curriculum requirement for all accredited programs. A PPE is an opportunity for students to reinforce skills and competencies learned in the classroom through real world application. The PPE is designed to provide students with practical work experience in the HIM competencies and domains that focus on skill building and practical application of theory. There may be several ways in which to gain this experience. However, at least a portion of the PPE must be a field-based practicum. The nature, location, and time in the field is outlined by the academic program and in accordance with CAHIIM standards. For all intents and purposes, the traditional PPE concept where students spend a significant number of hours (as defined by the academic institution) completing supervised work (whether online or on-site) is considered an internship, although it is referred to as a PPE.

A policy about the PPE that includes key phrases or terms noted below may provide comfort to employers determining whether or not they can offer an unpaid internship. That decision is the employer’s alone and may often be influenced by advice from their legal representative.

Key Phrases and Terms for PPE Policy:

- The PPE is a credit-based course, which applies toward degree completion, and requires tuition, fees and costs as normally occurs according to institutional policy.
- The college evaluates the appropriateness of the site to ensure they are placing students into secure and productive environments that further their education
- The PPE-site receives a copy of the learning outcomes and acknowledges its responsibility to the student by signing the PPE learning outcomes form
- Assigned faculty make contact with each student during the PPE (either in person or remotely) to ascertain the student’s progress toward completing her or his goals
- The site supervisor completes an evaluation of the student’s experience, and this evaluation is considered when determining the student’s final grade for the PPE
- Organizations with AHIMA-credentialed staff are eligible to claim 5 CEUs for providing on-site mentorship and supervision of students. The student’s daily log is used to vet the involvement of the credentialed member (see CCHIIM standard on page 6 of the 2014 version of the Recertification Guide*)

*CAHIIM does not prohibit a paid internship

How You Can Help

Participating in PPEs is a way to strengthen the academic experience for students regardless of your practice setting. If the organization values your skills and expertise, they would do well to consider how to increase the HIM presence in their organization. So how can the HIM professional contribute? In a traditional HIM department you can be a site supervisor or provide hands-on training to students in your area of specialty. In the nontraditional HIM site, you can contact a HIM program and offer to take students for a unique PPE (become a site manager). You can also campaign internally to start a PPE program—contact human resources and your immediate supervisor to discuss the advantages of having HIM student involvement in special projects where a fresh perspective would be appreciated.

Register to become a PPE site host. Upon registering to be a PPE site host an alternate host or mentor(s) from your organization, may be assigned accordingly. Registration does not guarantee or
require a student PPE placement; registration allows placement coordinators to contact you regarding your interest in being a host.

**How to Use This Guide**
This useful guide provides essential information for all aspects of the PPE. Using this guide will help you with preparation and planning, and create a positive PPE experience for all participants.

**Affiliation Site Guidance**
This section provides strategies for success, affiliation agreements and key responsibilities of affiliate sites, including nontraditional sites. There are also suggested student projects, and how to obtain continuing education units for participating credentialed staff members.

**Educator Guidance**
This section provides educators with a listing of key aspects of the PPE: understanding the needs of the affiliate site, ensuring your students have met site requirements, and post-PPE follow-up. Educators may also access a PPE toolkit in CourseShare. The toolkit provides example resources and templates for PPE mentor and student guidebooks as well as other helpful documents provided in a revisable format that may be modified according to programmatic needs.

**Student Guidance**
This section gives students a clear presentation on PPE preparation, responsibilities, and expectations for professional behaviors.

---

**Affiliation Site Guidance**

**Strategies to Ensure the PPE Is Meaningful**
In support of the above policy, it is important that the program, the PPE-site, and the students collaborate to create a PPE experience meaningful for both the students and the host site. Depending on the level and goal of the PPE, best practice includes a combination of job rotation in which the student completes the tasks of each job type, job shadowing of managers and directors during departmental and organization meetings, and project-based tasks that take a period of time to complete.

Evidence of a meaningful PPE can be vetted by an evaluation of the deliverables such as:

- Daily log
- Activity journal
- Work portfolio
- Project completion report
- Oral presentation of the project findings (to site/faculty/student cohort)

Affiliation-sites are organizations that agree to take HIM students for a non-paid or paid (note: some sites especially if vendor-related, will provide a stipend for the students) extended period of time in
order to aid the students in blending classroom theory with practical application. The students should be supervised and considered a contributing member of the PPE site staff. Depending on the type of PPE, the students will observe and experience day-to-day health information-related operations, provide documentation and recommendations in workflow, and complete special projects with supervision.

Organizations Serving as Affiliation-sites
Traditionally, most PPE sites were either acute care hospitals or non-acute care sites such as ambulatory clinics, larger physician practices, long-term acute care hospitals, skilled nursing and long-term care facilities, and home health or hospice centers. Today, HIM programs are reaching out to encourage student placement in all organizations where health information is managed, examined, or used for administrative, financial, or clinical decision making. These sites include, but are not limited to:

- Academic institutions
- Acute care hospitals
- Ambulatory clinics
- Ambulatory surgery centers
- Behavioral health facilities
- Blood centers
- Chiropractic
- Coding agencies
- Compliance organizations
- Consulting agencies
- Data analysis organizations
- Dental offices
- Dialysis centers
- Disease specialty centers
- Governmental agencies
- Health departments
- Health information exchanges
- Healthcare software companies
- HIM service providers
- Home health agencies
- Hospice care centers
- Hospital associations
- Hospitals
- Information technology departments
- Insurance agencies
- Law offices
- Long term care facilities
- Outpatient behavioral health centers
- Pediatric hospitals
- Pharmaceutical companies
- Physical therapy and sports rehab
- Physician office practices
- Primary care associations
- Professional associations
- Public health agencies
- Rehabilitation facilities
- Health information organizations
- State agencies
- System vendors
- University health centers
- Veterans Administration

Considerations for Vendor and other Nontraditional PPE sites
Hosting students in vendor settings provides the students with a great opportunity to envision positions outside the traditional hospital setting. It is important for the vendor site hosts to understand that the broad view of the HIM profession in more traditional settings is outside the scope of what
they are expected to do with the students. Students are exposed to the more traditional concepts through other mechanisms (such as other PPE visits or through a PPE resource repository).

It is understood that vendor settings often have remote staff, and if this is the case students may also conduct their PPE remotely if in accordance with the school’s policy. The students can learn how remote staff are managed and this is a valuable experience in and of itself. Vendors are asked to ensure appropriate access to materials is available. The students and school PPE coordinators are encouraged to start planning well in advance to allow vendor-based PPE sites with the time necessary to make arrangements for remote access to systems and materials. If it is not possible to provide students with system access, vendor sites can consider using test or training systems.

School PPE coordinators are also encouraged to provide clear direction to vendor sites about what their specific academic level of students can be expected to do and know. Vendors that are new to the concept of hosting students may need more direction than other site hosts.

Depending on the situation and/or facility, a corporate agreement, memorandum of understanding or generic model agreement is appropriate. The content of the document may address HIPAA training, background checks, required immunizations, TB status, and liability insurance. Affiliation agreements differ from site to site and state to state in regards to legal requirements expand briefly. Insert reference to appendices. A sample is provided in the appendices.

Preparing the Student Experience
Healthcare delivery has changed dramatically and continues to change rapidly. With the increased complexity of healthcare environments, there is a need to provide professional experiences that assist students and graduates to make the transition to the work setting with more realistic expectations and maximal preparation.

The practice of HIM is found in hospitals, long-term care and rehabilitation facilities, hospice and ambulatory care sites, provider organizations (for example physician, chiropractor, and dental practices), government agencies, consulting firms, insurance companies, software vendors, and in some cases virtually. This list of projects is not all-inclusive, but does offer suggestions to spur ideas. The instructor, site mentor (host), and student should collaboratively create projects. Additionally, the project should be a “real-world” assignment that benefits the site by fulfilling and supporting site-specific health information management needs. Some projects lend themselves to telecommuting or virtual modes of work, based on program-specific criteria, site-specific agreements and/or approval. Instructors have access to AHIMA’s Courseshare website that offers several virtual PPE modules when appropriate. Note that projects in the sample listing are differentiated by level of education, expected practice domains, expected skills or competencies, job descriptions, pay scales, and participation in decision-making.

Students should work closely with staff to increase clinical skills, knowledge, competence and confidence. The selected project or activity can be accomplished through multiple communication modes (depending on the student sponsor’s preference and technology
available). Completed projects may be presented face to face, via phone or conference lines, webinars, secure e-mail, video conferences, and web-based portals or drop-boxes.

Site mentors should work with educators to establish the best projects for the student/organization’s needs. A list of example projects is provided in the appendices for your reference. These examples are provided as guidance and the list is not all-inclusive. We encourage site hosts/mentors to design projects and activities that reflect real world practice within their organization. Please see the appendices for a list of example projects.

In addition, some programs may offer the option of a single final project. Instructors will find resources to support these activities in CourseShare. Please remember that the CAHIIM accreditation standard regarding PPE states, “PPE, whether on-site or through simulations must relate to higher level competencies and result in a learning experience for the student and/or a deliverable to a practice site. The PPE must provide the student with the opportunity to reinforce competencies and skill sets.” Example resources to support projects can be found in the PPE Toolkit on CourseShare.

**Getting Continuing Education Units for Credentialed Staff**

**Understanding CEUs for PPE Site Management**

When a facility accepts an HIM student for PPE, the time spent coordinating the visit and mentoring the student can count toward maintenance of professional CEUs. An individual credentialed member can claim five CEUs per year (or ten CEUs per two year cycle) for work performed with HIM students on their practicum visits. Here is an explanation of the credit:

**Case Scenario**—Jane goes to General Hospital for a one month PPE. She works with her site supervisor, Denise, the assistant director who has planned her visit and set up the various projects. Denise logged eight hours, prepping her facility to take the student. Denise gets five CEUs. During the month, Jane rotates through four positions and works five days with each credentialed person. Each of those four credentialed staff can claim five CEUs for helping Jane. The HIM director, Ann Smith, RHIA, greets the student on day one, but has no further interaction. Ms. Smith does NOT qualify for CEUs.

**The bottom line**—CEUS reflect personal effort from a credentialed member to help a PPE student. The CEUs don’t apply to just one person, nor do they automatically apply to every credentialed member on staff. A credentialed member may claim a maximum of five CEUs per year for PPE participation.

**Claiming the credit**—The student’s daily log should serve as proof of time the student spent with credentialed members. This is completed and submitted as instructed by the school. It is recommended that the site maintain a copy of the students log book for historical purposes in the event that any employees receive a CEU audit. At the end of the PPE, the PPE Instructor should send a copy of the student’s daily log in addition to CEU forms to the site supervisor for internal distribution.

In some cases, the school may require the site supervisor to complete and return the student’s evaluation form prior to receiving the CEU forms. Schools have a choice identifying credentialed members for CEUs. The school may either send one CEU form noting all credentialed members
involved in the student’s PPE, or they may issue individual CEU forms. Educators may access a certificate in the CourseShare PPE Toolkit.

Recertification Policy for Professional Practice Experience by the CCHIIM:

Credentialed staff must maintain their credential through collecting annual continuing education units. These units must apply to one of several CEU categories. In 2010, the CCHIIM modified the “other” category to include the language below:

“Substantive oversight and involvement of professional practice on behalf of a Commission on Accreditation for Health Informatics and Information Management (CAHIIM) education accredited program. **Five CEUs per student supervised with oversight or involvement with a maximum of ten (10) CEUs for student supervision allowed in each recertification cycle.**

Substantive oversight and involvement includes but is not limited to:
- Creating training plan and schedule of activities
- Developing and assigning project(s)
- Providing direction and guidance
- Conducting review of progress and providing feedback
- Conducting student evaluation at the conclusion of the PPE
- Other individuals assigned as PPE student mentors. **One (1) CEU for every 60 minutes of direct contact with a maximum five (5) CEUs (five hours of contact) per student, and a maximum of ten (10) CEUs allowed in each recertification cycle.**”

For additional information please visit: [http://www.ahima.org/certification/Recertification](http://www.ahima.org/certification/Recertification)

Educator Guidance

**Curriculum Content**
The HIM (and core general education) courses should be sequenced in a manner that ensures the student has performed a task prior to attending the PPE. Suggested resources that the Program can use to prepare students for the PPE include the [AHIMA Virtual Lab](http://www.ahima.org), [AHIMA Academy courses](http://www.ahima.org), [AHIMA CourseShare](http://www.ahima.org), [Wiki for Educator Resources](http://www.ahima.org), [AHIMA Foundation Common Employability Skills](http://www.ahima.org), and other software and applications. The PPE curriculum should include activities that require the student’s involvement in analysis, communication, critical thinking, presentation, planning and research. By working collaboratively with the site host, projects and activities can be developed to ensure positive student learning outcomes. The Curriculum Competencies documents can be found here: [Curriculum Competencies](http://www.ahima.org).

**Industry Needs**
PPE Coordinators and/or Program Directors should seek advice and support of community partners and industry stakeholders such as might be involved in the HIM Program Advisory Board. This valuable
input should serve as guidance when developing student-learning outcomes and allow for flexibility of student learning experience which meets the needs of the community they serve. Educators might see this as an opportunity to build upon the provided project examples that students and site mentors may select from.

**PPE Syllabus**
In addition to the syllabus content required by the college or university and CAHIIM, the PPE syllabus, at minimum should also include the following information for the student:

- Number of hours (at PPE site and/or in class)
- Specific functions that will be performed (topical or weekly list of functions)
- Deliverables at the end of PPE
- Due/completion dates
- Criteria for communicating with PPE Site and Program

Some programs may choose to reflect this information in the PPE student handbook and or program handbook.

Educators should visit [AHIMA CourseShare](#) to see the most up-to-date tools and resources to support their PPE coordination needs. In particular, the PPE toolkit includes items such as rewritable templates for creating student guides, syllabus and mentor guides.

**Student Guidance**

**Introduction**
The PPE is designed to provide students with practical work experience in the HIM competencies and domains that focus on skill building and practical application of theory. The PPE is an experience so there may be several ways in which to gain this experience. However, at least a portion of the PPE must be a field-based practicum. The nature, location, and time in the field is outlined by the academic program and in accordance with CAHIIM standards. Some practical considerations include:

- The student experience may include on-site experience only, or a hybrid of online and course assignments.
- The experience may be an individual experience or a team experience depending on the design of the academic institution and the Healthcare organizations that support PPE experience.
- The duration and details of the PPE experience will be determined by the Academic Director or Placement Coordinator with collaboration of the site mentor hosting the PPE.
- Programs vary in the number of hours and stipulations regarding on site hours, times and locations and specific requirements.

**Preparing for the PPE**
As general guidance, the following recommendations are provided to students:
Communication with the site mentor host
Each program determines the method of setting up the PPE. There are most commonly two methods: program makes initial contact or student makes initial contact. Students should ensure they are acting on the advice of their program director or clinical coordinator.

If the school program has arranged the site the student should be provided with the contact information of the person at that site. It is suggested that the student reach out to that person, to introduce themselves prior to their first day. The student may use this as an opportunity to share their resume and cover letter. During this contact, the student should verify any instructions such as reporting location, parking, and requirements for orientation (if not previously provided by the school coordinator).

In situations where the student is responsible for arranging their own placement the student should work with their school coordinator for suggestions and contact information (in accordance with the school policy). The student should then contact the site by either e-mail or by phone, as appropriate.

Preparation
The project(s) assigned to the student will vary from site to site and school to school. It is the responsibility of the student to ensure that they possess the appropriate skills and technical ability to complete any required assignments/projects. Students are encouraged to “brush up” their skills in Excel, Word, and prior theoretical knowledge prior to arrival. If appropriate, past instructional materials will be beneficial to the student in completing on site assignments.

Appearance
- Students should practice professionalism by presenting a professional appearance.
- Students should adhere to the facility’s dress code. Dress in suitable attire in accordance with the PPE site’s dress code.
  - For example, women should wear blouses and skirts, dresses, or dress slacks with hose or socks. Men should wear dress shirts, ties, and dress slacks with socks. Jeans, shorts, sneakers, sandals or t-shirts should not be worn—avoid extremes in jewelry, hairstyles, body piercing, tattoos, and make-up.
- Students are working in close proximity with professional staff, and as such must be aware of their personal hygiene. Issues such as the use of strong perfumes/colognes, tobacco odors, and deodorant issues must be considered.
- Students should wear their identification badge at all times in accordance with facility and/or school policy.
• If there are questions regarding proper attire and appearance, students should discuss them with the academic program director or site manager.

Student Responsibilities
Students have several responsibilities to consider as part of the PPE. The specific responsibilities will depend on the academic program and in some situations; individual sites will have unique and specific additional requirements.

• Students may incur expenses during the PPE. The expenses are the student’s responsibility and may include housing, travel, parking, and meals in addition to tuition and course fees.
• Students may be required to provide evidence of good health.
• Students may be required to undergo and pass a criminal background check.
• Students may be required to undergo and pass drug screening.
• Students may be required to complete Health Insurance Portability and Accountability Act (HIPAA) training and testing, as well as any other organizational orientation training.
• Students may be required to complete confidentiality attestations.

Expectations On-site

Attendance
Absenteeism and tardiness are considered unprofessional and undesirable traits. While there may be times when a student may be absent due to illness or other valid reasons, it is the student’s responsibility to make up the time, per the school policy and at the discretion of the site.

If a student is unable to work on a specified day, it is his or her responsibility to notify and set up arrangements to make up the missed time with either his or her PPE site manager and academic PPE coordinator. The student should act in accordance with institutional policy regarding tardiness and absences at all times.

Although every effort should be made to arrive at the site on time, if a student is running late, he or she must contact the PPE site manager and give him or her an estimated arrival time. A student should not ask to leave early. Students are expected to complete a certain number of hours in the field to fulfill the PPE experience. If departing early, be sure the arrangement is agreed to by the PPE site manager, and that a later visit is arranged to make up missed hours. Should the site suggest early departure due to lack of activities, make suggestion such as reviewing department policies/procedures so as not to lose on site hours. Excessive absenteeism and tardiness will likely adversely affect the student’s grade for the PPE course.

Conduct
• Students should demonstrate professional conduct throughout the course of the PPE.
• Students should demonstrate initiative by completing activities as assigned, asking appropriate questions for clarification as needed and/or research as necessary from prior educational materials to complete assignments.
• Students should complete assignments early, asking for additional work rather than waiting for someone to notice.
  o There may be times when clinical personnel are unavailable to work with the students. During those times students should use initiative to interview staff, maintain a PPE log of activity, review policy manuals, and complete assigned project work.
• Students may not receive supervision by the department manager/director as these activities may be delegated to other individuals within the department; as such, the student should take direction just as they would with their PPE site supervisor.
• Students should not use cell phones during working hours, including texting. They should make personal calls and texts only at breaks and lunch times. Additionally, the use of other electronic devices and applications is generally considered unprofessional in the PPE setting.
• Web access should be limited to the scope required by the organization and within the assigned project. Students should not surf the web during working hours; this includes checking e-mail, logging into social networking web sites and accessing school learning management systems, unless requested to do so by the site for a specific purpose (i.e., downloading a form or researching a topic).
• Students should demonstrate a professional attitude during any unexpected situations that might occur.
  o They should assist, if possible; otherwise, be a silent observer or remove oneself from the situation.
  o They should remember that much can be learned by observing how other professionals handle difficult situations.
• Students should utilize professional communication.
  o They should be cognizant of the professional titles used in the healthcare setting. Medical professionals, patients, and coworkers should be addressed in the appropriate manner at all times (for example, Doctor Jones, Mrs. Smith, or Mr. Johnson).
  o Students should maintain professional relationships at all times and be appreciative of facility personnel at all skill levels and job classifications.
  o As professionals, students are expected to handle minor difficulties that arise on one’s own. However, if attempts to solve the situation have been unsuccessful, these matters should be brought to the attention of the PPE site manager and the academic PPE coordinator.
  o Students should avoid gossiping or complaining with site staff and/or other students. If there are issues, they should be discussed with the academic PPE coordinator.
Students should maintain a daily log of activities accomplished during their PPE in accordance with school instructions. This log should be shared with their site manager periodically to see what has been accomplished, what needs to be completed in the time remaining, and what activities can be added or deleted.

- Ethics and Confidentiality
  - Students are expected to:
    - Adhere to AHIMA’s Code of Ethics
    - Adhere to AHIMA’s Standards of Ethical Coding
    - Abide by the school’s Code of Student Conduct
    - Abide by applicable facility policies and procedures
    - Abide by HIPAA and other regulations, as appropriate.

Deliverables
The student should refer to the course syllabus for instruction regarding grade determination. Regardless of these requirements, students should complete deliverables as if holding a position within the facility. Therefore, all assignments must be professional in appearance and free from errors such as grammar and spelling. Exemplary projects and assignments may be used to inform the site of future needs and/or provide a resource.

Thank-you note
Students are encouraged to send personal, handwritten thank-you notes to their PPE sites. Notes can include highlights from the experience and list things that expanded their HIM understanding. Students should recognize individuals that contributed to their experience. Students should send handwritten personal thank-you notes to specific individuals, and share how they contributed to their experience.

Post PPE
A PPE placement is not a guarantee or offer of employment. However, many times students who demonstrate competency and are a good fit for the team receive additional consideration or recommendation when new employment opportunities arise. All individuals who a student interacts with during the PPE have the potential to offer a professional referral or recommendation.

Upon conclusion of PPE, students are encouraged to take advantage of networking opportunities with HIM professionals whenever they are available. Attending state association meetings may provide additional opportunities to network with site contacts and their peers. The student may also participate in regional associations that can provide the same opportunities within their local communities. Many times networking through these events provides recent graduates with exposure to potential employers. In addition, students should be cognizant of how social media may reflect their professional image. Professional and personal networking tools should be utilized appropriately.
Conclusion

Thank you for taking the time to read this very important guide. It is imperative to the HIM profession that we continue to support student opportunities for meaningful professional practice experience. We all remember and value the lessons learned and the relationships established during our PPE. By providing current students with this same opportunity, we gain a sense of renewal and reinvigorate our dedication through leadership to the professional community that we represent.

In a landscape of ever-changing technology, standards and regulations, it is often difficult to imagine, how we can provide a student with the exposure they require, in order to gain a solid foothold in the profession. Consider ways in which a student learning opportunity could also benefit your organization. Are there emerging technologies that you wish to explore, but haven’t found the time? Are you interested in seeing processes from a fresh perspective? Are there people on your team that would benefit from coaching and mentoring? All these examples provide excellent opportunities for students to explore HIM through practical, hands-on approach that allows them to translate theoretical learning into real world competency development.

If you are interested in learning more, please reach out to your local academic institution(s). Refer to the CAHIIM Accredited Program Directory to locate programs in your region, including contact information. There are many ways to get involved and share your experience and expertise with budding professionals of tomorrow. Additionally, if you have suggestions for future PPE considerations, please feel free to share those thoughts here: academic.affairs@ahima.org.
Appendices

AHIMA Code of Ethics

AHIMA Standards of Ethical Coding

Ethical Standards for Clinical Documentation Improvement (CDI) Professionals
Unpaid Intern Fact Sheet

Fact: There is no legal classification of “unpaid intern.”
No section of the Fair Labor Standards Act exempts “interns” at not-for-profit organizations from the minimum wage requirements. An individual who performs tasks at an organization is an employee, volunteer or trainee. A volunteer or trainee can be unpaid if the volunteer or training program meets the legal requirements.

Fact: State and Federal law have always required that interns who function as employees be paid; however, the law hasn’t always been enforced.
Since the Black Swan intern case there has been increased interest from plaintiff’s lawyers on this topic:


There’s also a website that collects information from unpaid interns for litigation purposes;, the intake questionnaire makes no distinction between for-profit and non-profit.

http://unpaidinternslawsuit.com/

Fact: According to the Department of Labor, interns will be viewed as employees unless all six factors are met:

- The internship, even though it includes actual operation of the facilities of the employer, is similar to training which would be given in an educational environment;
- The internship experience is for the benefit of the intern;
- The intern does not displace regular employees, but works under close supervision of existing staff;
- The employer that provides the training derives no immediate advantage from the activities of the intern; and on occasion its operations may actually be impeded;
- The intern is not necessarily entitled to a job at the conclusion of the internship; and
- The employer and the intern understand that the intern is not entitled to wages for the time spent in the internship.

Practical Tips (ASAE University Annual Association Law Symposium April 4, 2014)
- If an employer uses interns as substitutes for regular workers or to augment its existing workforce during specific time periods, interns should be paid.
- If an employer would have hired additional employees or required existing staff to work additional hours had interns not performed the work, interns should be paid.
- If interns receive the same level of supervision as employer’s regular workforce, interns should be paid.
• If employer is providing job-shadowing* opportunities and the intern performs no or minimal work, more likely that interns can be unpaid.
  *Job-shadowing must occur under close and constant supervision
• CAHIIM states “It is expected that HIM students will not be substituted for paid staff. The PPE does not prohibit a paid internship.”

Other Sources:


http://www.councilofnonprofits.org/interns


http://form1023.org/what-are-employees-interns-volunteers
Examples of Projects for Students

Associate Degree Level Projects

1. Create a plan for implementation of system applications/new technology (e.g. ICD-10/CAC) for the Health Information Department. (RHIA) (Domain III, A. Health Information Technologies and Domain V, B. Change Management)

2. Create new quality indicators for document imaging and the methodology to implement them. (RHIA and RHIT) (Domain III, H. Information Integrity and Data Quality and Domain V, C Analyze & design workflow processes; Participate in the development and monitoring of process improvement plans)

3. Perform a data collection for a state-mandated reporting requirement. This could mean collecting data by diagnosis or by lab result, summarizing per-state requirements, and submitting results appropriately. (RHIA) (Domain III, F. Consumer Informatics)

4. Present report findings at a regional or state HIMA meeting. (RHIA) (Domain V, A. Leadership Roles and E. Training & Development)

5. Assist in the coordination of an external audit: Process audit requests (RACs; other payers), and track each request through the process of submitting the audit, provide a spreadsheet of data elements to allow tracking as audit results are returned. (RHIA) (Domain I, Health Record Content & Documentation; Domain IV, B. Regulatory)

6. Perform a review of the productivity standards of a specified functional area; coding, record analysis, document imaging, release of information, etc. Research benchmark standards for use in comparison. Summarize and make recommendations. (RHIA and RHIT) (Domain V, C. Work Design & Process Improvement)

7. Develop, maintain, and operate a patient identity management program, and train staff in maintaining the system. (RHIA) (Domain II, B. Data Privacy, Confidentiality, and Security and C. Release of Information)

8. Design and implement business continuity, information integrity, and risk management plans for the HIM functions. (RHIA and RHIT) (Domain I, C. Data Governance; Domain II, A. Health Law, Domain III, H. Information Integrity and Data Quality and Domain V, K. Enterprise Information Management)

9. Identify appropriate data sources for HIM research. Suggested topics can be found on the AHIMA Foundation grants website and the AHIMA Body of Knowledge. (RHIA and RHIT) (Domain I, D. Data Management & Secondary Data Sources, Domain III, B. Information Management Strategic Planning and C. Analytics & Decision Support and E. Research Methods)

10. Identify and graphically present the information architecture across EHR/PHR/HIT/Patient Portals, with a focus on finding gaps and potential for privacy and security breaches. (RHIA) (Domain III, F. Consumer Informatics and G. Health Information Exchange; Domain II, B. Data Privacy, Confidentiality, and Security and C. Release of Information)

11. Review current privacy practices and update according to current regulations. (RHIA) (Domain II, B. Data Privacy, Confidentiality, and Security and Domain V, F. Strategic & organizational Management)
12. Develop web-based documentation tools for student learning based on documentation requirements of that profession. Conduct training and educational activities. (RHIA) (Domain V, E. Training & Development and Domain III, A. Health Information Technologies)

13. Develop a Request for Proposal (RFP) for a specific product or service needed in the department. Distribute to select vendors, evaluate RFP responses and present analysis and final recommendation to the current department head. (RHIA) (Domain 5i: Vendor/Contract Management)

14. Research and update written guidelines of criteria that defines the designated legal health record. (RHIA) (Domain 1 D1: Manage health date elements and/or data sets)

15. Develop a written policy on Information Governance as it pertains to daily release of information. This should incorporate information security and protection, compliance, data governance, electronic discovery, risk management, privacy, data storage and archiving. (RHIA) (Domain 2 B & C Data Privacy, Confidentiality & Security Release of Information)

16. Skill-building in areas like presentation, training session (privacy and confidentiality for example) Develop training materials and present to a group either in person or via electronic methods such as WebEx. Prepare a presentation or present one that has already been prepared to build/demonstrate public speaking skills. (RHIA) (Domain V, A. Leadership Roles and E. Training & Development)

17. Create a power-point presentation for department staff on ethical behavior (RHIA) (Domain V, H Ethics)

18. Complete analysis of outsourcing versus in-house processes for a specific function within the department (Example: coding, release of information, transcription, etc.) (RHIA) (Domain V, G Financial Management)

19. Analyze claims denied for payment. Identify and trend any missed or inappropriate information payer-specific requirements and work with appropriate staff to build edits to reduce denials and rejection by third party payers. (RHIA) (Domain IV, C Coding)

20. Design a dashboard for electronic review of the productivity standards of a specified functional area; coding, record analysis, document imaging, release of information, etc. Research benchmark standards for use in comparison. Summarize and make recommendations. (RHIA and RHIT) (Domain III, B Information management strategic planning & Domain V, F Strategic and Organizational Management)

21. Develop a strategy for staff recruitment and retention (RHIA) (Domain V, B Human Resources Management)

22. Conduct research to determine if any new codes (CPT, HCPCS, and Revenue Codes) need to be added to the charge master. (RHIA) (Domain IV, A, Revenue Cycle & Reimbursement)

23. Analyze an audit trail to determine if there was inappropriate access to the medical record (RHIA) (Domain II, Information Protection, Access, Disclosure, Archival, Privacy & Security)

24. Educate coders on changes to any and all classification codes ex. ICD-10, DSM, IRF-PPS (RHIA) (Domain V, Training and Development)

25. Code a chart and validate the code assignment as compares to the coder’s assigned codes. (RHIA) (Domain IV, Revenue Management)

26. Compare what is produced out of the system for the legal medical record to what is documented in the electronic health record to document the differences and determine the
items that need to be added to the legal medical record format. (RHIA) (Domain II, Information Protection: Access, Disclosure, Archival, Privacy and Security Health Law)

Baccalaureate Degree Level Projects

1. Create new quality indicators for document imaging and the methodology to implement them. (RHIA and RHIT) (Domain V, Quality Task 4. Design efficient workflow processes)

2. Utilize a database for searching and summarizing the results of a clinical review. (RHIT) (Domain V, Quality Task 9. Develop reports on audit findings and Task 10. Perform data collection for quality reporting (core measures, PQRI, medical necessity, etc.)

3. Perform a review of the productivity standards of a specified functional area; coding, record analysis, document imaging, release of information, etc. Research benchmark standards for use in comparison. Summarize and make recommendations. (RHIA and RHIT) (Domain I, Data Analysis and Management Task 17. Summarize findings from data research/analysis)

4. Create a multidisciplinary documentation format that can also be used in paper form during downtime. (RHIT) (Domain III, Compliance Task 15. Develop forms)

5. Develop the functional requirements for data retrieval and analysis and create a simple computer-based data collection application using Microsoft Access. (RHIT) (Domain I, Data Analysis and Management Task 8. Organize data into a useable format and Domain IV, Information Technology Task 7. Create database)

6. Design and implement business continuity, information integrity, and risk management plans for the HIM functions. (RHIA and RHIT) (Domain VI, Legal Task 8. Work with risk management department to requested documentation and Task 9. Identify potential health record related risk management issues through auditing)

7. Identify appropriate data sources for HIM research. Suggested topics can be found on the AHIMA Foundation grants web site and the AHIMA Body of Knowledge. (RHIA and RHIT) (Domain I, Data Analysis and Management Task 17. Summarize Findings from data research/analysis)

8. Perform an audit on the most common reasons for a physician query. Educate physicians on how they can improve their documentation. (RHIT)(Domain VII, Revenue Cycle, Task 1. Communicate with providers to discussion documentation deficiencies)

9. Review unbilled and un-coded audit reports to see if there is a trend in why accounts cannot be coded or are delayed. Share these results with other staff members. (RHIT) (Domain VII, Revenue Cycle, Task 3. Collaborate with other departments on monitoring accounts receivable.)

10. Conduct research to determine if any new codes (RHIT) (CPT, HCPCS, Revenue Codes) need to be added to the charge master. (Domain VII, Revenue Cycle- Task 10. Maintain the charge master)

11. Respond to a request for amendment (RHIT) (Domain VI, Legal, Task 10. Respond to and process patient amendment requests to the health record)

12. Analyze an audit trail to determine if there was inappropriate access to the medical record (RHIT) (Domain IV, Information Technology, Task 17. Analyze access audit trails)

13. Educate coders on changes to any and all classification codes ex. ICD-10, DSM, IRF-PPS (RHIT) (Domain II, Coding, Task 11. Provide educational updates to coders)
14. Code a chart and validate the code assignment as compares to the coder’s assigned codes. (RHIT) (Domain II, Coding, Task 4. Validate code assignment)

15. Analyze a patient’s chart for completeness (RHIT) (Domain III, Compliance- Task 4. Monitor documentation for completeness)

16. Monitor the duplicate medical record report and merge the records as appropriate under the supervision of a staff member (RHIT) (Domain I, Data Analysis and Management- Task 6. Maintain the master person index)

17. Research and update written guidelines of criteria that defines the designated legal health record. (RHIT) (Ensure patient record documentation meets state and federal guidelines (HIPAA, state, hospital, etc.)

18. Calculate actual cost for processing ROI requests to compare with OCR Guidance for Patient Access. (RHIT) (Domain III, Ensure compliance with privacy and security guidelines (HIPAA, state, hospital, etc. or Manage release of information)

**Graduate Degree Level Projects**

At this time, there are no CAHIIM accreditation standard or curriculum requirements for graduate degree programs. For examples and resources at the graduate level, please see CourseShare.
Affiliation Agreement Sample

It is agreed by the aforesaid parties to be of mutual interest and advantage for selected students of **College** to be provided quality clinical education experiences through **Affiliate** and of mutual interest to **Affiliate** to participate in the provision of such quality education. **College** has established the following clinical training programs that require the educational facilities of **Affiliate** for clinical experiences:

- Health Information Technology Students
- Physical Therapist Assistant Students
- Radiation Therapy Students
- Radiologic Technology Students
- Computed Tomography Students
- Magnetic Resonance Imaging Students
- Diagnostic Medical Sonography Students
- Respiratory Therapy Students

The terms in this Affiliation Agreement apply to all clinical training programs selected above. Additional terms specific to any of the clinical training programs shall be contained on an attached schedule. Collectively, the terms of this Affiliation Agreement and the attached schedules are referred to as the "Agreement".

The parties acknowledge they have read this Agreement, understand it, and agree to be bound by all of its provisions. This Agreement constitutes the complete and exclusive statement of the Agreement between the parties, and supersedes all prior oral and written communications concerning the subject matter of this Agreement.

IN WITNESS WHEREOF, the parties have executed this Agreement on the date shown below.

**College**

By________________________________________

Date____________________________

**Affiliate**

By________________________________________

Date____________________________
I. GENERAL AGREEMENT

A. The term of this Agreement shall be for one year and shall be automatically renewed for successive terms of one (1) year unless otherwise terminated. This Agreement may be terminated by either party with sixty (60) days prior written notice accomplished either by personal service or by certified or registered mail upon the (College) Dean of Instruction and (Affiliate) President. Any students enrolled in the ongoing programs at the time of such termination notice shall be given the opportunity by (Affiliate) and (College) to complete the requirements of the program as offered at the time of their entry and in compliance with the conditions contained in this Agreement.

B. This Agreement shall be subject to periodic review as the need may arise, in order to consider any amendment, alteration, or change as may be mutually agreed upon in writing by the parties.

C. This Agreement shall be interpreted in accordance with and pursuant to the law of the state of ____________.

D. Nothing in the Agreement is intended to be contrary to state or federal laws. In the event of a conflict between terms and conditions of this Agreement and any applicable state or federal laws, the state or federal law will supersede the terms of this Agreement.

II. MUTUAL RESPONSIBILITIES

A. (College) personnel, faculty and students shall not be deemed to be employees or agents of (Affiliate), and nothing herein contained shall be construed as creating a relationship other than that of an independent contractor between (Affiliate) and (College), its employees, faculty, and students. (College) personnel, faculty, and students shall not be entitled to compensation from (Affiliate) in connection with any service or actions of benefit to (Affiliate) that are a part of or related to the educational program. (Affiliate) and its employees shall not be entitled to compensation from (College) for services or actions of benefit to (College) that are part of or related to the educational program.

B. (College) personnel, faculty and students are not eligible for coverage under (Affiliate)’s worker’s compensation or unemployment compensation insurance programs. (College) will provide, if any, worker’s compensation or unemployment compensation coverage as required by state law for students enrolled in the program. It is not anticipated that the students shall be compensated for services and clinical training, and by this section, it is not intended to extend worker’s compensation or unemployment compensation coverage beyond the specific requirements and provisions of state statute.

C. (College) shall provide, at its own expense, comprehensive general liability insurance covering bodily injury and property damage liability with minimum coverage limits of $1 million per occurrence/$2 million general total limit, and medical professional liability insurance with minimum coverage limits of $1 million per claim/$3 million annual
aggregate, covering (College), its faculty and students participating in the educational programs under this Agreement. (College) shall provide (Affiliate) with a Certificate of Insurance as evidence of such insurance coverage.

(College) will defend, indemnify and hold harmless (Affiliate), its officers, agents, employees, and representatives from any and all claims for loss or damage to property or injury or death to persons, including costs, expenses, and reasonable attorney's fees, arising from negligent or wrongful acts or omissions of (College), its faculty, or students as they pertain to services rendered under this Agreement.

(Affiliate) agrees to notify (College) when any faculty member or student has been involved in an incident reported to (Affiliate).

D. (Affiliate) shall provide, at its own expense, adequate liability insurance coverage for its employees.

(Affiliate) will defend, indemnify and hold harmless (College), its trustees, officers, agents, representatives, employees, faculty, and residents from any and all claims for loss or damage to property or injury or death to persons, including costs, expenses and reasonable attorney's fees, arising from the negligent or wrongful acts or omissions of (Affiliate) or its employees as they pertain to services rendered under this Agreement.

E. Except as otherwise provided on any schedule attached hereto, (College) will provide qualified certified teachers to teach all prescribed courses. The faculty members will select and assign learning experiences of students in accordance with agreed-to schedules and work assignments. Faculty members will work with appropriate representatives and personnel of (Affiliate) in determining the needs of patients assigned to students.

(College) shall notify (Affiliate) in writing of any change or proposed change of any clinical instructor. (Affiliate) may request that (College) replace incompetent, inefficient, or merely non-cooperative clinical instructors assigned to any of the clinical training programs by providing (College) with a letter describing such incompetence, inefficiencies, or non-cooperation. (College) shall, within five (5) days, provide (Affiliate) with names of qualified replacement staff, such replacement staff to be employee(s) of (College) unless otherwise mutually agreed to.

F. (College) shall provide (Affiliate) with a schedule for student assignments, including the number and names of students, and a copy of the clinical objectives in sufficient time (a minimum of four (4) calendar weeks) prior to the beginning of the student rotation to allow for adequate planning and staffing of the department to meet the needs of the department and the patients of (Affiliate).

(Affiliate) shall determine whether its physical plant will be made available for the educational purposes requested by (College). Under no circumstances shall (Affiliate) be deemed to have consented to the use of its physical plant, programs, personnel, plans, or schedules except as specifically indicated and mutually agreed upon.
G. **(College)** shall comply with Title VI of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972 and Section 504 of the Rehabilitation Act of 1973, and related regulations, and ensure it does not and will not discriminate against any person on the basis of race, creed, sex, national origin, age, or handicap under any program or activity receiving federal financial assistance.

H. The safety, health, and welfare of **(Affiliate)**'s patients shall be of the utmost importance in this Agreement. **(College)** will provide necessary assurance or evidence of acceptable health levels of the students and faculty while working in the clinical area.

I. **(Affiliate)** shall provide **(College)** with all bylaws, rules, regulations, and standards of **(Affiliate)** and its medical staff and shall participate in an orientation program in conjunction with **(College)** for informing all participating faculty and students of the provisions thereof. Students assigned to the educational program that do not abide by the bylaws, rules, regulations, and policies of **(Affiliate)** or meet the standards of safety, health, and ethical behavior prescribed thereby, may be suspended, placed on probation or dismissed from the clinical program. Prior to instituting disciplinary actions, **(College)** shall, in consultation with **(Affiliate)**, provide the student notice of the proposed action and an opportunity to be heard. **(College)** shall be responsible for the proper conduct of students and instructors while at **(Affiliate)** as governed by the rules and regulations of the clinical area.

J. **(College)** shall provide or reimburse **(Affiliate)** for supplies and reimburse **(Affiliate)** for the cost of any damage to equipment used for instructional purposes.

III. COLLEGE RESPONSIBILITIES

A. **(College)** shall maintain sole responsibility for the educational programs of students assigned to **(Affiliate)**. **(College)** shall offer educational programs accredited by appropriate national and state accrediting organizations and shall determine standards of education, hours of instruction, clinical learning experiences, instructional schedules, evaluation of students, and other matters pertaining to educational programs offered by **(College)**. **(College)** shall maintain all student records relevant to the clinical training programs.

B. **(College)** shall not discriminate against any student applicant for enrollment in its course of study because of race, creed, sex, national origin, age, or handicap.

C. All **(College)** personnel, faculty, and students shall be informed of and shall abide by the bylaws, rules, and regulations of the medical staff and any other applicable rules or policies of **(Affiliate)**, and at all times shall maintain the appropriate degree of care and responsibility in connection with the educational programs when dealing with patients, facilities, and medical staff.
D. *(College)* acknowledges and agrees that the patient’s attending physician determines the course of care and treatment for an individual patient. *(College)* shall be responsible for ensuring all interactions between its faculty and students and a patient comply with the orders and desires of the attending physician.

E. All *(College)* personnel, faculty, and students who have access to patient or research medical records shall maintain strict confidentiality with regard to said records and shall not disclose any information contained therein to any person outside the clinical training program in which they are involved.

F. *(College)* maintains the privilege for its faculty to visit *(Affiliate)*’s facility during normal business hours for purposes connected with the educational program during the educational period.

G. *(College)* agrees that the student shall:

1. Be permitted all *(Affiliate)* holidays.
2. Have the responsibility of transportation to and from *(Affiliate)* and on any reasonable special assignment by *(Affiliate)*.
3. Be responsible for own absences due to illness or other cause and *(Affiliate)* notification.
4. Complete health forms requested by *(Affiliate)*.
5. Be responsible for following all policies of *(Affiliate)*.
6. Be responsible for providing the necessary and appropriate uniforms required, if any, but not provided by *(Affiliate)*.
7. Be responsible for reporting on time to the designated individual at *(Affiliate)*’s facility.
8. Be responsible for the STUDENT’S own housing during clinical education assignment.
9. At all times, behave in a professional and ethical manner as defined in the professional code of ethics and/or departmental policies and procedures.
10. Sign a Confidentiality Statement utilizing the form attached hereto as Exhibit A.

IV. AFFILIATE RESPONSIBILITIES
A. (Affiliate) shall cooperate with (College) in the preparation of students in clinical education programs. To the extent (College) is able to make offerings available, (Affiliate) will provide clinical space, subject to availability, to qualified students from (College) for educational purposes under the guidance and supervision of the clinical instructors during such periods of time and to such extent as (Affiliate) shall agree. (Affiliate) retains responsibility for its patients at all times.

B. (Affiliate) shall determine the number of students it will accept during a specific clinical educational period and shall notify (College) within ten (10) days of receipt of schedule. (Affiliate) may, in its reasonable discretion, limit the number of students in any of the clinical programs.

C. (Affiliate) shall designate in writing a liaison to work with (College)’s assigned Clinical Instructors.

D. (Affiliate) shall complete all forms as requested by (College) such as general information forms and evaluation reports.

E. (Affiliate) shall not discriminate against any student applicant because of race, creed, sex, national origin, age or handicap.

F. (Affiliate) shall permit the full-time and part-time faculty and students assigned to (College’s) educational programs to use its patient care, medical record and data facilities for clinical education, provided that such use shall not conflict with or violate any rules, regulations, bylaws, or policies of (Affiliate). Such use shall be subject to, and at all times comply with, the confidentiality provisions contained in subsection III.D of this Agreement.

G. (Affiliate) shall make available rooms or areas where groups of students may hold discussions and receive clinical instruction, and permit, for educational purposes, the use of such supplies and equipment as are commonly available for patient care, the cost of same to be reimbursed by (College).

H. (Affiliate) shall maintain full certification by the appropriate state certifying authority and full accreditation by the Joint Commission.
A. (College) and (Affiliate) shall jointly appoint clinical supervisors, who shall be employees of (Affiliate), and shall be granted release time by (Affiliate) for instruction and evaluation of the students enrolled in the clinical training program. (College) shall grant the advisory committee members and clinical supervisors a minimum of three credit hours per semester and rights and privileges of (College).

Note: This page is optional and should be utilized for additional terms specific to any of the clinical training programs subject to this Agreement.
Exhibit A

Confidentiality Agreement

(Affiliate) recognizes the importance of protection of confidential information concerning patients, their families, medical staff and co-workers, and the operations of the Affiliate. It is also the intent of (Affiliate) and the undersigned student to protect the privacy and provide for the security of Protected Health Information (PHI) disclosed to the undersigned student in compliance with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and privacy regulations published by the US Department of Health and Human Services (DHHS) and other applicable laws. It is the obligation of the undersigned student to maintain the confidentiality and privacy of PHI or other confidential information and to relay facts pertinent to the treatment of a patient only to those who are involved with the patient’s treatment program or for quality improvement activities.

All patient and Affiliate information stored via paper or on any of the Affiliate computer systems is considered confidential. Computer systems allow qualified individuals to access, from authorized terminals, restricted and confidential patient and Affiliate information. The Affiliate shall issue a confidential password and security code to authorized individuals. It is the authorized individual’s ethical and legal responsibility to maintain and comply with all confidentiality requirements.

(Affiliate) requires that all students agree to the following:

1. I WILL PROTECT THE CONFIDENTIALITY OF PATIENT AND AFFILIATE INFORMATION.
2. I WILL NOT RELEASE UNAUTHORIZED INFORMATION TO ANY SOURCE.
3. I WILL NOT ACCESS OR ATTEMPT TO ACCESS INFORMATION OTHER THAN THAT INFORMATION WHICH I HAVE AUTHORIZED ACCESS AND A NEED TO KNOW IN ORDER TO COMPLETE MY JOB ON ANY GIVEN DAY.
4. I WILL NOT DISCLOSE MY SECURITY CODE TO ANYONE.
5. I WILL NOT USE ANOTHER PERSON’S SECURITY CODE.
6. I WILL NOT WRITE DOWN PASSWORDS OR SECURITY CODES THAT WOULD MAKE THEM ACCESSIBLE TO OTHER INDIVIDUALS.
7. I WILL REPORT BREACHES OF THIS CONFIDENTIALITY AGREEMENT BY OTHERS TO THE AFFILIATE PRIVACY OFFICER. I UNDERSTAND THAT FAILURE TO REPORT BREACHES IS AN ETHICAL VIOLATION AND SUBJECTS ME TO DISCIPLINARY ACTION OR CONTRACT TERMINATION.
8. I UNDERSTAND MY SECURITY CODE(S) IS MY ELECTRONIC SIGNATURE ON THE MEDICAL RECORD.
I HAVE READ AND AGREE TO ADHERE TO THE CONDITIONS OF THIS
CONFIDENTIALITY AGREEMENT. I ALSO ACKNOWLEDGE THAT ANY
VIOLATION OF THE ABOVE CONDITIONS CAN RESULT IN DISCIPLINARY
ACTION OR CONTRACT TERMINATION.

___________________________________  _____________________________________
STUDENT SIGNATURE                      DATE

___________________________________  _____________________________________
NAME (Please Print)                     AGENCY/SCHOOL