

University of Virginia Health System Observation Agreement (10/08/01)

Observer: Fill out this form and review the attached information.

Please Print

Name of Observer: _____ **Date of Birth:** _____

(Must be at least 16 years)

Sponsor Name/ Role or Title: _____

Dates of Observation (Maximum time of observation not to exceed 16 hours which must be completed in no more than 3 days or as arranged with faculty sponsor): _____

Purpose of Observation: _____

Location(s) of Observation: _____

Signature of Manager in area of Observation: _____

Manager Name Printed: _____

In consideration of being given the opportunity to sponsor an observer at the University of Virginia Health System, I agree to the following: (SPONSOR)

1. The observer will review the attached written information regarding the Health System's rules for **Patient Confidentiality** and **Standard Precautions**. I will answer any questions the observer may have about this information.
2. I understand that the observer is permitted **only to view patient care, and only with patient consent**. I agree that the observer will not touch any patient or anything in the patient's environment, or provide any kind of miscellaneous or medical care. (Observing in the Operating Room is strictly prohibited without formal approval from the OR).
3. The observer will **wear his/her identification badge at all times** while in the Medical Center or satellites. (Badges should be picked up from the ID Office, 1st Floor West Complex, UVA Health System.)
4. The observer will **follow good hand washing practices** while at the hospital, specifically after using the bathroom, and upon entering or leaving a patient care area. The observer will **not enter isolation rooms** and will not come to observe when he/she is **sick**, has a fever, or has been exposed to a contagious disease.

Sponsor Signature: _____

(OBSERVER)

1. I agree to **follow the directives of my sponsor or their designee**. I understand that I must remain with him or her while in patient care areas – I am not permitted to move freely around the hospital. I understand that I am on Medical Center Property at my own risk and insurance coverage or, in the case of a minor, under the coverage of my parent(s) or guardian(s).
2. I agree to **abide by the hospital's dress code**, to dress neatly and with the awareness that I am a temporary representative of the Health System. Specifically, I agree not to wear jeans, shorts, sweat clothes or T-shirts.
3. A **Fire Alarm** is announced by a series of four gongs followed by **"Call to Station,"** and the location of the alarm. I agree to follow directions of my sponsor in the event of a fire alarm in an area where I am observing.
4. With my signature below, I agree to uphold The UVA Medical Center policy regarding **patient confidentiality**, and will not divulge any medical, financial, or other personal information about a patient or their family.
5. I understand that **failure to comply** with the rules and policies above will result in **termination** of the observation.

Signed by Observer: _____ **Date:** _____

If Observer is a minor (as defined by the Commonwealth of Virginia as being under the age of 18) also signed by parent/guardian:

Signed by Parent/Guardian: _____ **Date:** _____

Patient Confidentiality at UVA Health System

Guidelines for Observers

When a patient comes to the University of Virginia Medical Center, the Medical Center assumes an obligation to keep in confidence all that pertains to that patient. Information regarding the patient's **admission, diagnosis and treatment, as well as personal and financial affairs is confidential** and must be respected... Every person employed or providing services in any capacity in the University of Virginia Medical Center shares this responsibility.

From the Medical Policy Manual, #0021

The Five Basics:

1. Information **learned** at the hospital **stays** at the hospital.
2. **Access to patient information is on a need to know basis only.** If you need information to do your job for the patient, you are allowed to know it, and keep it confidential (of course!). Observers may not read patient's charts.
3. **Use discretion!** Information about a patient is shared **only** with that patient or their caregiver, and with patient permission, with their family. If you have questions or concerns about a patient, ask your sponsor.
4. **Information in all possible forms is confidential,** whether verbal, written, overheard, on the computer screen, told to you by the patient... it makes no difference.

In conversation, don't breach confidentiality by speaking about patients in corridors, elevators, and the cafeteria. Seek privacy as much as possible.

5. **Friends deserve confidential treatment too!** Come up with an icebreaker to use when you unexpectedly meet a friend or acquaintance at the hospital. (*"I'm surprised to see you here... Can I do anything for you?"* **not** *"What are you doing here?"*) Don't put your friend on the spot! If they want you to know why they are here, they will tell you.

UNIVERSITY OF VIRGINIA HEALTH SYSTEM

INFECTION CONTROL TRAINING FOR OBSERVERS

Infection Control Training is designed to help you understand how you can help protect yourself from a bloodborne pathogen exposure while observing at the Health System. Bloodborne pathogens are passed from person to person by blood, body fluids, or other potentially infectious materials. Bloodborne pathogens include viruses like hepatitis B, hepatitis C, and HIV, the virus that causes AIDS. Healthcare workers can become infected with these viruses if they are exposed to a patient's blood or body fluids in a way that can transmit disease, such as a needlestick. As an observer, you will not be allowed to perform tasks that will bring you in contact with blood or body fluids so you are at extremely low risk for having an exposure to a bloodborne pathogen.

What is an exposure?

Although observers are not allowed to perform tasks that bring them in contact with blood or body fluids, accidental exposures can occur. If you are exposed to blood or body fluids in any of the following ways you may be at risk for getting a bloodborne pathogen:

1. Stick with a sharp object that has blood or body fluids on it (needles, scalpel, broken glass);
2. Getting blood or body fluids on nonintact skin (cuts, abrasions, hangnails, rash);
3. Getting blood or body fluids into your eyes, nose or mouth; or
4. Getting blood over a large area of intact skin.
5. Getting a stick with an unidentified object

As an observer you should not be at risk for these kinds of exposures. However, if you do accidentally have one of the above exposures or get blood or body fluids on your clothes, immediately ask for assistance from the nursing staff. Remove any contaminated clothing without contamination the rest of your body. Such clothing must be laundered or disinfected before it can be taken home. Wash any exposed area of your body immediately with soap and running water followed by rubbing alcohol. If your eyes, nose or mouth are splashed with blood or body fluids, flush them with large amounts of running water. **Report your exposure immediately to the Nursing Supervisor. She can be reached by having the unit staff or hospital operator page her at beeper #1523.**

Standard Precautions

Standard Precautions are used to **prevent** health care workers, hospital staff and volunteers from coming in contact with blood or body fluids. Because no one can tell who may have a bloodborne pathogen, using Standard Precautions means you must consider all patients' blood, body fluids, mucous membranes and tissue to be infected. Following these precautions will help keep you safe while you observe.

- Do not eat, drink, apply cosmetics, lip balm or handle contact lenses in patient care areas.
- Do not perform CPR or participate in a Code 12 in the Health System.
- Do not handle sharp instruments or glass containers that may be contaminated with blood, body fluids, or human tissue.
- Do not handle contaminated materials containers (CMC's) that are in use. You may put together new CMC's.
- Do not handle patient specimens or put food or drink in refrigerators, freezers, or cabinets used to store patient specimens.
- Do not touch surfaces or objects that may be contaminated with blood or body fluids.
- Do not observe or get close to a procedure in which splash or spray of blood or body fluids may occur.
- Do not clean up blood or body fluid spills.
- Do not handle linen that is visibly soiled with blood or body fluids.