

GME Policy #: I-K	Graduate Medical Education Policy & Procedures Pennsylvania Hospital	Page 1 of 9 Effective: 06-18-08
	Subject: Clinical Observerships at PAH	

POLICY:

In support of its educational mission, Pennsylvania Hospital of the University of Pennsylvania Health System (PAH) and Graduate Medical Education (GME) will provide individuals with observation experiences in accordance with the procedures spelled out in this policy.

No physician trainee under contract anywhere in the United States as a resident or fellow may be brought into a PAH Graduate Medical Education (GME) sponsored program as an observer. Such physician trainees must be considered as an outside rotator to a PAH program, and must follow all policies and procedures for outside rotations (GME Policy #I-D Educational Affiliations-Rotations, Program Letters of Agreement and Master Affiliation Agreements).


Observerships may be granted on a case-by-case basis to the following individuals: graduates of non-LCME accredited medical schools; or individuals who are invited, based on the trainee’s past experiences, by a clinical department in the Clinical Practices of the University of Pennsylvania (CPUP). Individuals who are applying for an observership from a program or country outside the United States must be coming to the United States for the experience and returning to their program/country of origin, or must have other arrangements independent of and outside of PAH after the observership. PAH observerships must not be used as a means to obtain US-based experience for the purposes of seeking graduate training in the United States.

The availability of an observership is at the discretion of individual GME training program based on that department's availability of resources, and the existence of this policy creates no obligation on the part of training program or any clinical department in CPUP to provide such an experience.

Please note that individuals who have not yet graduated from medical school (i.e., medical students) must receive consideration for a Visiting Student Elective via the Office of Academic Affairs, University of Pennsylvania School of Medicine; for further information, see: <http://www.med.upenn.edu/>.

PURPOSE:

The purpose of this policy is to provide an environment that is safe for patients, staff, students, and observers; respects patients’ rights to privacy and confidentiality; allows for continued provision of patient care; and enhances the educational experience of the observer.

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DEFINITION:

An “observership” is defined as the position of observing patient care in a health care setting, without patient contact, for the specific purpose of gaining medical knowledge.

SCOPE:

This policy applies to all individuals seeking observational experiences at PAH or those parts of the CPUP involved in GME training programs. This policy also applies to all faculty sponsors of individuals seeking observational experiences.

IMPLEMENTATION:


It is the responsibility of all faculty, employees, and/or departments who sponsor individuals for observerships to implement this policy.

PROCEDURE:

A. Application Process

1. The following documents must be provided by the person interested in an observership to the hosting clinical department and to the PAH Office of Graduate Medical Education:
 - a. Current, up to date curriculum vitae
 - b. Letter from the hosting PAH entity GME Program Director with responsibility for the residency training that addresses the following items:
 - i. Authorization and eligibility to pursue international elective experiences, if appropriate
 - ii. Current level of training
 - iii. Dates observer began and completed medical school
 - iv. Date observer began and completed (if applicable) residency training
 - v. Curricular requirements to be met by the observership experience.
 - vi. Evidence of health insurance to cover accidents, illness, etc. while performing the observership

2. Not all GME training programs accept observers, and hosting programs may require further application documentation, an interview, and/or additional information.


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3. Before beginning an observership, the following items must be completed:
 - a. Health screening with documentation of immunization status for measles, mumps, rubella, tetanus, hepatitis B, and polio. Any lapsed immunizations must be obtained at the observer's expense.
 - b. Evidence of screening for tuberculosis to include a skin test and chest x-ray as clinically indicated must be provided.
 - c. Applicants who do not have United States citizenship or permanent resident status must obtain a visa that will be in force for the entire duration of the observership. The visa holder must comply with all terms of the visa during the observership.
 - d. Programs hosting or sponsoring observers must ensure that the observer has a PAH-entity photo identification badge.
 - e. Clinical Observer Terms and Conditions signed by the observer and an authorized PAH or PAH-entity representative.
 - f. All necessary mandatory training completed by the observer and documentation of compliance including:
 - i. Patient Confidentiality (individual will sign the Pledge to Patient Confidentiality).
 - ii. HIPAA Training (individual will complete the assessment and sign the HIPAA Acknowledgement Form).


B. Rules for Observerships

1. The observer must obtain prior written authorization from the applicable hosting Program and complete the Clinical Observer Terms and Conditions. Failure to do so may be grounds for immediate escort from the premises of PAH.
2. The observer must wear appropriate photo identification at all times when on campus or within the PAH hospitals and other facilities, and must abide by all policies, rules, regulations, and bylaws of PAH, the clinical department, and the PAH hospitals or other facilities.
3. The observer must be supervised by a faculty physician or designee (other faculty from the same department or a senior-level resident) at all times when in the presence of patients. He/she is not allowed unrestricted access to PAH or to the PAH hospitals or other facilities.
4. The observer must introduce him/herself to the patient as an observer, and must request the patient's permission to be present at the time of clinical visit, procedure, or other patient services. If the patient declines to allow the observer's presence, he/she must leave the area.

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5. The observer is not allowed any other direct patient contact. Contact is defined as physically touching, performing a medical history and/or examination, counseling (patient or patient's family/friends), assisting in surgery or any other procedure, or otherwise interacting with patients, either individually or in the presence of others.
6. The observer cannot make patient chart entries (electronic or hard copy). He/she may not make copies of patient charts (paper or electronic).
7. If required by the training program, the observer must complete an evaluation of the rotation upon the completion of the observership.
8. No stipend support, compensation, insurance coverage, benefits, or housing will be provided by PAH or any of the training programs; these items are the sole responsibility of the clinical department or the observer as determined within the discretion of the clinical department.
9. PAH may, at its sole discretion, terminate the observership without recourse to due process or appeal process by the observer.
10. The observership is performed on a voluntary basis, and the observer is not employed by PAH or any GME training program.
11. The observer will not receive any academic credit for the experience. The observership does not constitute medical education, graduate medical education, continuing medical education or training leading to licensure or board certification.
12. Upon satisfactory completion of the observership, the sponsoring program will provide the observer with a certificate of completion or other documentation of the observership.
13. Observerships can not be used as evidence of clinical experience for the purposes of seeking graduate medical education in the United States.

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University of Pennsylvania Health System
Graduate Medical Education

a.
b. OBSERVER CHECK LIST

For the academic year July 1, _____ to June 30, _____

Name: _____


Pennsylvania Hospital training program: _____

Start Date of Rotation: _____ End Date of Rotation: _____

Current Level of Training: _____

The following documents must be provided to observe at UPHS as per GME Policy #II-I:

1. Clinical Observer Terms and Conditions Form signed by the Observer and authorized PAH representative
2. Copy of current Medical License or Certificate of Registration
3. Copy of Medical School Diploma
4. Current up-to-date curriculum vitae
5. Written evidence of health insurance coverage for the duration of your rotation.
6. Health screening documentation of immunization status for measles, mumps,

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rubella, tetanus, hepatitis B, and polio. Any lapsed immunizations must be obtained at the observer's expense.

7. Evidence of screening of tuberculosis to include skin test and chest x-ray as clinically indicated must be provided.


8. Copy of passport and visa must be submitted prior to arrival and presented for verification on date of arrival.

9. Pledge to Patient Confidentiality Form.

10. HIPAA Training Acknowledgement Form.

11. Photo Identification Badge Form. (completed upon arrival)

**The Office of Graduate Medical Education must receive
all requirements at least 2 weeks prior to arrival date**

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These Terms and Conditions must be signed and submitted to the Pennsylvania Hospital Office of Graduate Medical Education no less than 24 hours prior to the scheduled start time of the clinical observation that has been authorized pursuant to applicable Pennsylvania Hospital policy, and a copy must be placed in program's files.

University of Pennsylvania Health System
Clinical Observer
Terms and Conditions

This Clinical Observer's Terms and Conditions ("Terms and Conditions") between _____ [fill in the name of the applicable program] Pennsylvania Hospital of the University of Pennsylvania Health System as owned and operated by the Trustees of the University of Pennsylvania ("UPHS") and _____ [fill in the individual's name] ("Clinical Observer") specifies the Terms and Conditions under which Pennsylvania Hospital will permit Clinical Observer to be present in the specified patient care or other UPHS areas.


1. Location, Time, and Purpose. Clinical Observer is permitted to participate in the

_____ [fill in the rotation/experience] on _____,

200__ through _____ 200__ [specify the date(s)] The Clinical Observer will participate only in the approved rotation and access only those physical areas relative to the rotation and will leave immediately upon the request of any UPHS staff. Clinical Observer's presence on the above named rotation/experience has been approved for the purpose of: [clearly and precisely state the reason the Clinical Observer is permitted to participate in the rotation/experience.]

UPHS may withdraw its approval at any time for any reason.

2. Confidentiality. Clinical Observer will have access to patient information and UPHS information of a confidential and/or proprietary nature, including but not limited to patient medical information, patient demographic information, and information regarding UPHS's provision of health care and practices ("Confidential


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Information”). Clinical Observer will (a) secure and protect the Confidential Information consistent with standards and laws applying to the security and protection of patient information, including, but not limited to any such regulations under the Health Insurance Portability and Accountability Act of 1996, and any applicable state privacy and security legislation or regulations, (b) will not use the Confidential Information except to achieve the Purpose under these Terms and Conditions, and (c) will not disclose the Confidential Information except to those individuals providing medical care to the patient. This restriction will not apply to Confidential Information the Clinical Observer is required by law, regulation, rule, or court order of any governmental authority to disclose if Clinical Observer first notifies UPHS as soon as possible, but in no event less than fifteen (15) days, prior to disclosure, and cooperates with UPHS in any response to such required disclosure. In addition, Clinical Observer will immediately inform UPHS of any disclosure of Confidential Information to anyone, whether or not permitted by this agreement or any other agreement between Clinical Observer and UPHS. If Clinical Observer receives any Confidential Information, it will return it to UPHS or destroy it the sooner of the end of the procedure or upon UPHS’s request.

3. Representations, and Warranties.

- a. Clinical Observer represents and warrants that he/she is aware of UPHS’s safeguards against the introduction of infection and that he/she is not aware that he/she has any infectious disease. Clinical Observer represents and warrants that he/she will comply with all safeguards against infection and other hazards.
- b. Clinical Observer represents and warrants that he/she will comply with UPHS’s rules, policies, and procedures including the UPHS Policy on Clinical Observership at UPHS.
- c. Unless specifically approved through the UPHS Office of Medical Affairs, Clinical Observer represents and warrants that he/she will not directly or indirectly physically touch patients, will in no way interfere with the provision of health care in UPHS and, will not perform medical history and/or examinations, counseling (patients or patients’ family or friends), assist in surgery or any other procedure or otherwise interact with patients, either individually or in the presence of others.
- d. Clinical Observer represents and warrants that he/she will not photograph, audiotape, videotape, or otherwise record any aspect of the surgical procedure or recovery unless expressly permitted pursuant to a UPHS policy.
- e. Clinical Observer represents and warrants that he/she will respect the privacy of all patients.

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