



APPLICATION FOR JOB SHADOW OBSERVATION

Thayer County Health Services welcomes the opportunity for students who are required to job shadow and observe health care career opportunities. All sections of this application must be completed. Questions? Please contact TCHS Human Resources at 402-768-4641 or humanresources@tchsne.org.

SECTION 1: PERSONAL INFORMATION

Name: _____

Phone Number: _____

E-mail Address: _____

Address: _____

Educational Background: _____

Name of Class Requiring Observation Hours: _____

Date of Birth: **(Students must be 16 years old and students under the age of 19 must provide parent or guardian signature)** _____

Have you been convicted of **any** crime in the past seven years? ____ Yes ____ No
If yes, please explain _____

*Conviction will not necessarily disqualify applicant from consideration. Disclose **all** misdemeanors and felonies including DUI or MIP but not minor traffic offenses. **NOTE:** Omitting information or failure to disclose may disqualify you for consideration.*

What healthcare career/department would you like to observe? *(Please list, in order, your top three interests – this may not guarantee that your top choice is available on the dates requested)*

1. _____

2. _____

3. _____

Please list available days and times you would be able to schedule observation:

Please list any individual or agency that will need documentation of your job shadowing hours.

SECTION 2: ACKNOWLEDGEMENT OF JOB SHADOW OBSERVATION POLICY

Please read the Job Shadow Observation Policy and Complete the Acknowledgment.

This policy addresses all requests from Students who are enrolled in a class that require job shadow observation hours, and outlines the procedure for application and expectations on the day of scheduled job shadow observation.

Thayer County Health Services defines job shadow observation as an educational work-based experience where an opportunity of observation is provided for students who have a class requirement to complete job shadow observation hours.

Job shadowing may be scheduled on a day Monday- Friday during the hours of 8:00am – 5:00pm for up to eight (8) hours, subject to department schedules. Students must be at least 16 years old and students under the age of 19 must provide parent or guardian signature. Students will not be performing patient care duties, as it is observation only, and job shadowing will not fulfill those requirements needed for clinical experience.

Human Resources will be responsible in maintaining job shadow observation applications and all required paperwork. Human Resources will also obtain from the student's school a signed TCHS affiliation/confidentiality agreement.

TCHS Application Process:

Applicant must complete application on www.thayercountyhealthservices.com and submit to TCHS Human Resources. Application will include, but not limited to:

1. Job Shadow Observation Policy Acknowledgement.
2. TCHS Confidentiality Policy Acknowledgement.
3. Applicant and/or Guardian Acknowledgement of up-to-date immunizations (DPT/TDaP, Flue Shot, Hepatitis B, Inactivated Poliovirus, MMR, Varicella (chicken pox).
4. Acknowledgment that in the event of a communicable disease, the student will reschedule. If the student report to Job Shadow event ill, the department manager will reschedule.
5. Dress Code Policy Acknowledgement.
6. Conflict of Interest and Disclosure Policy Acknowledgement.
7. Code of Conduct Acknowledgment.
8. Provide a copy of class syllabus or schedule showing requirement of job shadow observation hours.



Restricted areas for job shadow observation include the following:

- Surgery
- Labor
- ER
- Nursery

Completed applications may be emailed to humanresources@tchsne.org; faxed to Human Resources at 402-768-4679; or mailed in to the following:

Thayer County Health Services
Attn: Human Resources
120 Park Avenue
Hebron, NE 68370

Human Resources will inform applicant of when application is received and submit application to the department director/supervisor. If application is approved, Human Resources will be in contact with Student to schedule job shadow observation, and coordinate with TCHS department director/supervisor.

Approved Students will be required to complete Safety Storm training which includes Patient Privacy and Safety Policies in SwankHealth (online training). Human Resources will provide instructions to the Student.

On Student Job Shadow Observation Day:

- Student will meet with Human Resources prior to scheduled job shadow observation time to obtain name badge and review the safety policies and received application acknowledgments.
- When meeting with Human Resources, Student will provide the following:
 - Certificate of training completed from SwankHealth,
 - List of immunizations
- Students will need to dress appropriately according to TCHS Dress Code Policy.
- Director/supervisor or employee designee will receive verbal consent from patient prior to Student's observation. This includes informing the patient of Student's age and intent of Job Shadow.

Student will not be allowed continued or future job shadow observation if at any time Student refuses to follow or complete any of requirements of the TCHS policies as stated. If a HIPAA breach has been reported and founded to be true, Student may not be eligible for future hiring.

I have read and will follow the above Job Shadow Observation Policy.

Student Signature

Date

Parent/Guardian Signature (If applicable)

Date

SECTION 3: ACKNOWLEDGMENT OF HIPAA PRIVACY AND SECURITY VIOLATION SANCTIONS

Please read the HIPAA Privacy and Security Violations Sanctions Policy:

Thayer County Health Services (TCHS) is committed to complying with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and the associated Privacy Rule, which requires covered entities to apply appropriate sanctions against members of their workforce who fail to comply with privacy policies and procedures. Accordingly, TCHS will ensure the confidentiality and integrity of patient and/or



employee protected health information (PHI) by ensuring that all workforce members comply with TCHS privacy and security policies, along with state and federal regulations.

TCHS will appropriately and consistently discipline workforce members for any violation of privacy or security policies/procedures to a degree appropriate for the gravity of the violation. In addition, workforce members who knowingly and willfully violate state or federal law for improper use or disclosure of a PHI are subject to criminal investigation and prosecution or civil monetary penalties. TCHS and its workforce members will not intimidate or retaliate against any workforce member or individual that reports a potential incident.

Definitions

Health Insurance Portability and Accountability Act of 1996 (HIPAA)-A federal law that sets national standards to protect the privacy and security of protected health information.

Privacy Rule: Implemented by the US Department of Health and Human Services to meet the requirement of the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"). The Privacy Rule addresses the use and disclosure of protected health information by organizations subject to the Privacy Rule, as well as standards for individuals' privacy rights to understand and control how their health information is used.

Protected Health Information (PHI): Health data that is created, received, stored, or transmitted by HIPAA covered entities and their business associates in relation to the provision of healthcare, healthcare operations and payment for healthcare services. Relates to the past, present, or future physical or mental health or condition of an individual; the provision of health care to an individual; or the past, present, or future payment for the provision of health care to an individual that is: transmitted electronically, maintained electronically, or transmitted or maintained in any other form. Includes all individually identifiable health information, including demographic data, medical histories, test results, insurance information, and other information used to identify a patient or provide healthcare services or healthcare coverage.

Workforce Members: Include, but are not limited to: full-time employees, part time employees, trainees, volunteers, contractors, and temporary workers

Patient and/or employee PHI information may not be used or disclosed except to authorized users for approved purposes. Access to PHI is only permitted for direct patient care, approved administrative and/or supervisory functions, approval from the Privacy Officer, or allowed expectations per TCHS Use and Disclosure Policies.

When a TCHS workforce member is using or disclosing PHI, or when requesting PHI from another covered entity, the TCHS workforce member will make reasonable efforts to limit PHI to the minimum necessary to accomplish the intended purpose of the use, disclosure, or request.

TCHS workforce members should not access their own PHI. If a workforce member desires copies of their PHI, they must submit a request through the TCHS Health Information Department. Furthermore, TCHS workforce members should not access or disclose their immediate family member's PHI (including minor children), even when allowed by the Health Information Release Form, unless access is within the scope of their job duties. For additional information on permitted use and disclosure of PHI, please refer to TCHS' HIPAA/Privacy Use and Disclosure Policies.

Compliance of TCHS privacy policies/procedures and state/federal privacy regulations will be monitored through routine and random system audits performed by the Revenue Cycle Director or HIM Supervisor.

Workforce members are required to immediately report all non-compliance of TCHS privacy policies/procedures and/or state/federal privacy regulations via one of the following avenues:

- Direct Supervisor/Director
- TCHS Privacy, Security, or Compliance Officer
- TCHS Compliance Hotline

For additional information on reporting refer to the TCHS Compliance Reporting and Internal Investigation Procedure Policy.

A workforce member who makes a report of a suspected or actual disclosure in good faith will not be retaliated against for making the report. Failure to report a breach of which the workforce member has knowledge of will result in appropriate corrective action, up to and including termination. Refer to TCHS Correction Action Policy.

Once an alleged violation is reported or discovered, the TCHS Privacy Officer will conduct a thorough investigation of the alleged violation and may request assistance from others such as human resources, the workforce member's supervisor/director, other workforce members, and/or other vendor/contractors as needed. The investigation will include, but is not limited to, the following actions:

- Completion of an audit trail/log to identify and verify the violation and sequence of events.
- Interview any individual that may be aware of or involved in the incident. All individuals are required to cooperate with the investigation process and provide factual information to those conducting the investigation.
- Provide individuals suspected of non-compliance of TCHS privacy policies/procedures the opportunity to explain their actions to determine whether the violation was unintentional or malicious.
- The investigation will be thoroughly documented in a timely manner.
- TCHS leadership will take appropriate steps to prevent recurrence of the violation (when possible and feasible).
- The TCHS Privacy Officer will maintain all documentation of the investigation, sanctions provided, and actions taken to prevent reoccurrence for a minimum of six years after the conclusion of the investigation.

Violation of any privacy policy or procedure by workforce members may result in corrective action, up to and including termination of employment (refer to the TCHS Correction Action Policy). Violation of any privacy policy or procedure by others, including providers, providers' offices, business associates and partners may result in termination of the relationship and/or associated privileges. Violation may also result in civil and criminal penalties as determined by federal and state laws and regulations.

The below guideline will act as TCHS' minimum recommend disciplinary action for privacy violations. A Privacy and Security Violation Severity Determination Document will be utilized in assessing appropriate corrective action, which is provided in Appendix A.

Category 1: Accidental or inadvertent violation. This is an unintentional violation of privacy or security that may be caused by carelessness, lack of knowledge, lack of training, or other human error.

- Examples include, but are not limited to: leaving a computer unlocked and unattended, transmission of PHI to the correct party via an unsecured e-mail, or incorrectly entering a fax number resulting in PHI being sent to the wrong party.
- Category 2: Failure to follow established privacy and security policies and procedures. This is a violation due to poor job performance or lack of performance improvement. Examples include, but are not limited to: release of PHI without proper patient authorization, leaving detailed PHI on an answering machine, improper disposal of PHI, failure to properly safeguard passwords, failure to safeguard portable device from loss or theft, or discussing PHI where others could overhear.
- Category 3: Deliberate or purposeful violation without harmful intent. This is an intentional violation due to curiosity or desire to gain information, for personal use.



- Examples include, but are not limited to: accessing, reviewing, or disclosing PHI without a legitimate reason to do so, such as reviewing the health record of a friend, family member, celebrity, etc. out of curiosity or personal concern.
- Category 4: Willful and malicious violation with harmful intent. This is an intentional violation causing patient or organizational harm.
- Examples include, but are not limited to: disclosing PHI to an unauthorized individual or entity for illegal purposes (such as identity theft), posting PHI to social media websites, or disclosing PHI to the media.

Corrective action may be modified based on mitigating factors as outlined below:

Examples of factors that reflect greater damage caused by the violation and thus increase corrective action, include:

- Violation of sensitive information such as HIV-related, psychiatric, substance abuse, and genetic data
- High volume of people or data affected
- High exposure for the organization
- Large organizational expense incurred, such as breach notifications
- Hampering the investigation, lack of truthfulness
- Negative influence on others
- History of performance issues and/or violations

Examples of factors that result in less damage caused by the violation and thus decrease the corrective action, include:

- Violator's lack of knowledge of privacy and security policies/procedures due to inadequate training, training barriers, or limited English proficiency
- Violation occurred as a result of attempting to help a patient
- Victim(s) suffered no financial, reputational, or other personal harm
- Violator voluntarily admitted the violation in a timely manner and cooperated with the investigation
- Violator showed remorse
- Action was taken under pressure from an individual in a position of authority

All workforce members will sign an Acknowledgement of HIPAA Compliance Form, which acknowledges the workforce member understands TCHS' Privacy Policies/Procedures, including corrective actions outlined in this policy, and has received HIPAA privacy training.

I have read and will follow the above HIPAA Violations and Sanctions Policy.

Student Signature

Date

Parent/Guardian Signature (*If applicable*)

Date



SECTION 4: IMMUNIZATIONS

I understand that I will need to bring with me on the scheduled date of job shadow observation proof that I have received the following immunizations:

- DPT/DTap/Tdap (Tetanus)
- Flu (Influenza)
- Hepatitis B
- Inactivated Poliovirus
- MMR
- Varicella (Chicken Pox)

Student Signature

Date

Parent/Guardian Signature *(If applicable)*

Date

SECTION 5: COMMUNICABLE DISEASES

I understand that in the event of a communicable disease, TCHS will reschedule job shadow observation. I also understand that if I report to my schedule job shadow observation ill, I will need to reschedule my observation for a different day.

Student Signature

Date

Parent/Guardian Signature *(If applicable)*

Date

SECTION 6: DRESS CODE

Please read the Dress Code Policy and complete the acknowledgement:

Policy: TCHS Employees contribute to patient care and to the core values of TCHS in the way they present themselves. A professional appearance is essential to a favorable impression with other employees, patients and visitors. Good grooming and appropriate professional dress reflect employee pride and inspire confidence on the part of such persons.

- TCHS department directors may define appropriateness and uniformity in employee dress and appearance. Employees who do not meet a professional standard may be sent home to change, and nonexempt employees will not be paid for that time off. Departments with uniforms and uniform looks will be maintained at all times.
- Because not all articles or types of clothing can be adequately described herein, it is the responsibility of each department director to assure compliance with the following dress standards.
- All Clothing must be clean, well-maintained, and appropriate to the work environment.
- Appropriate business attire will be worn when you are representing Thayer County Health Services on business outside of the building, giving a presentation, and any other appropriate business appointment/meeting.



- Badges must be worn at all times during work hours for identification purposes, the front of the tag must be worn face-out, such that the wearer's photo and name are showing at all times. Putting sticker over the employees face or any other like defamation to the nametag is not permitted.
- All departments at the discretion of the department director may observe Denim Day Fridays at which time denim jeans may be worn as well. Denim jeans that have a destroyed look (i.e. holes, fabric tears, etc.) are not permitted.
- Professional dress is expected at all times. Permitted dress includes: Capri pants; colored denim if in good condition and not faded; dresses of appropriate length of no higher than mid-thigh; leggings or Jeggings with tops and/or dresses are no higher than mid-thigh; sleeveless garments providing undergarments are not showing; decorative sweaters may be worn; T-shirts or sweatshirts with school logos may be worn on designated school activity days.
- Shorts and spaghetti strap tops are not permitted. T-shirts or sweatshirts with advertising, especially drug and alcohol advertising are not permitted. .
- Footwear should be clean, professional in appearance and styled appropriate to the manner of dress. For example "tennis" shoes are appropriate for nurses and other "walking intensive" personnel. Casual slip on or dress sandals are appropriate if approved by department manager.
- Facial and lobe piercings should have a professional appearance and must be approved by department manager. Piercing jewelry should be tasteful and appropriate for all business and professional attire. No piercings with advertising, especially those that advertise drugs or alcohol.
- Body art in the form of tattoos and other skin pigment alterations is a personal choice; however, management reserves the right to ask an employee cover anything that is deemed to be inappropriate for viewing by management, customers and other employees.
- TCHS will provide uniforms for the surgery department only. Number of uniforms and cost limit determined by FY budget approval. TCHS will continue to launder uniforms for the departments of surgery, environmental services, and dietary. Environmental services and dietary are not required to have their own personal uniforms laundered.
- This policy is to be recognized and followed by all TCHS employees, student volunteers, doctors, and TCHS contract employees. Those who are not in compliance with this policy may be subject to Formal Corrective Action as described in TCHS Corrective Action Policy.

This policy is to be recognized and followed by all TCHS employees, student volunteers, doctors, and TCHS contract employees.

I have read and will follow the Dress Code Policy during my scheduled job shadow observation.

Student Signature

Date

Parent/Guardian Signature (If applicable)

Date



SECTION 7: CONFLICT OF INTEREST AND DISCLOSURE & CODE OF CONDUCT

Please read the Conflict of Interest and Disclosure and Code of Conduct policies and complete the acknowledgement:

Conflict of Interest and Disclosure

TCHS employees will use the utmost good faith in their dealings with and on behalf of the organization.

- No one is permitted to use his or her knowledge of the company operations or plans in such a way that a conflict might arise between them and the organization.
- No one will accept gifts, favors, or entertainment that might influence his or her decision-making responsibilities to the organization (See Gifts and Gratuities Policy).
- A full disclosure of all facts pertaining to any transaction, including jobs outside of the organization that are subject to any doubt concerning the possible existence of a conflict of interest, must be made before consummating the transaction.
- A conflict of interest arises when there is outside interest in an entity providing services to the organization or providing services to the client or patient.
- Any conflict of interest will be reported as outlined in the Compliance Reporting and Internal Investigation Policy.
- In the event input, voting, or decisions are required, the individual(s) with a conflict is excluded from the activity.
- The company will comply with Medicare statutes, regulations, and disclosure requirements.
- All employees and governing body members will be trained through internal training programs on the Conflict of Interest and Disclosure Policy during orientation and annually. All employees will be required to complete a Conflict of Interest Form annually and a copy placed in their Employee Personnel File. If any change in outside employment or other activities should occur throughout the year, it is the employee's responsibility to disclose such information on the Conflict of Interest Form located on TCHS intranet.
- Employees who do not disclose conflict of interest and does not act in good faith as described in this policy will be subject to the Corrective Action Policy.

Code of Conduct

Thayer County Health Services (TCHS) shall conduct business in an ethical and behaviorally acceptable manner. These expectations are necessary to maintain our tradition of clinical and operational excellence and maintain the pride of our community. TCHS expects and requires every employee and agent to comply with each of the following duties and ensure that his/her behavior and activity is consistent with the requirements of this Code of Conduct.

Respect

TCHS employees and agents shall create a workplace that fosters dignity and the well-being of every person by:

- Demonstrating professionalism
- Using service friendly phrases
- Communicating openly, honestly, and professionally
- Collaborating with employees, agents, and patients
- Assuming positive intent



Integrity

TCHS employees and agents shall maintain the integrity of every person by:

- Acting with humility
- Complying with all relevant laws, regulations and policies
- Exercising good faith and stewardship of human and financial resources
- Avoiding conflicts of interest
- Actively participating in educational opportunities
- Maintaining awareness of legal responsibilities
- Reporting conduct suspected to be in non-compliance
- Performing duties in an ethical manner

Compassion

TCHS employees and agents shall demonstrate solidarity and empathy in the care provided and in interactions with one another by:

- Acting in common good of all people
- Delivering patient centered, personalized care
- Delivering cause driven work
- Promoting dignity and respect

Excellence

TCHS employees and agents shall foster high performance by:

- Enforcing accountability
- Promoting innovation, creativity and proactively finding solutions
- Embracing change
- Thinking strategically
- Performing work duties efficiently
- Working as a team
- Promoting employee participation with purpose
- Ensuring the safety and well-being of all people
- Maintaining a high level of knowledge and skill to provide high quality care

The integrity of TCHS is diminished when any of these standards is violated. TCHS expects every person to report any violation of which he or she has knowledge of.

I have read and will follow Conflict of Interest and Disclosure & Code of Conduct policies during my scheduled job shadow observation.

Student Signature

Date

Parent/Guardian Signature (*If applicable*)

Date



SECTION 8: CLASS INFORMATION

Please attach to this application your syllabus, class schedule or letter from school counselor showing job shadow observation hour requirement.

Thank you for completing this application. Please mail completed application to:

Thayer County Health Service
ATTN: Human Resources
120 Park Avenue
Hebron, NE 68370

OR...

You may also email to humanresources@tchsne.org or fax to Human Resources at 402-768-4679.

Human Resources will notify you when application is received.

***Questions? Please call TCHS Human Resources at 402-768-4641
or email humanresources@tchsne.org.***