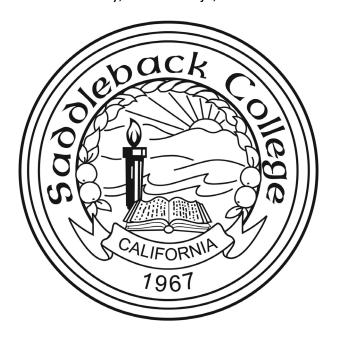
### SADDLEBACK COLLEGE HEALTH INFORMATION TECHNOLOGY PROGRAM

Health Sciences & Human Services Division 28000 Marguerite Parkway, Mission Viejo, CA 92692



### PROFESSIONAL PRACTICE EXPERIENCE MANUAL

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### I. INTRODUCTION

PROFESSIONAL PRACTICE EXPERIENCE (PPE) GOALS & PARAMETERS— The overall goal of Professional Practice Experience (PPE) is to provide HIT student externs with hands-on, reality-based experiences with HIM competencies and domains that focus on skill building and practical application of theory at designated healthcare organizations. Students will be placed in an on-site 50-hour externship at one of Saddleback College's contracted clinical facilities in the last semester per the road map if they have satisfactorily completed the requirements of the program.

- 1. The externship, although it includes actual operation of the facilities of the employer, is similar to training that would be given in an educational environment.
- 2. The externship experience is for the benefit of the extern.
- 3. The extern does not displace regular employees but works under close supervision of existing staff.
- 4. The employer that provides the training derives no immediate advantage from the activities of the extern, and on occasion its operations may be impeded.
- 5. The extern is not necessarily entitled to a job at the conclusion of the externship.
- 6. The employer and the extern understand that the extern is not entitled to wages for the time spent in the externship.

**PURPOSE OF THE PPE MANUAL** – This manual is designed to serve as a guide for Saddleback College HIT studentsand their externship site supervisors to help foster an optimal Professional Practice Experience that benefits both the student and the clinical site.

### II. RESPONSIBILITIES

### A. Student Responsibilities

### \*Requirements subject to change

Before participating in the PPE externship program, HIT students are required to complete the following clearances listed below via CastleBranch and eValue. (See the "Student Externship Checklist" in the Appendix). Students will receive eValue instructions via email. Note that there may also be additional items required by the individual sites (discuss with PPE Coordinator during scheduling). Any findings may affect the student's ability to progress through or complete the program. Students need to create an account with CastleBranch and eValue and start the clearance process six months in advance by June 1st and complete by December 1st right before starting externship (HIT 130) in Spring. It is the student's responsibility to ensure that all clearances are current (not expired) throughout the duration of HIT 130.

1. CASTLEBRANCH COMPLIANCE TRACKER, BACKGROUND CHECK & DRUG TEST (Package Cost

**\$112.75)** Purchase by June 1<sup>st</sup>. You must set up an account, purchase the compliance tracker, background check and drug test package with CastleBranch.

The background check and drug test results can take up to 3 weeks. No uploads are necessary

since results will be directed to the appropriate designee in the HSHS Division office or the appropriate personnel at the educational affiliate site who shall maintain student confidentiality per FERPA and California privacy law.

### Steps:

To place an order, go to CastleBranch

Please Select: Place OrderPlease Select: DF60all

Under <u>Student Information</u> enter the following:

Designation: UndergraduateDegree/Certification: HIT

• Expected Date of Graduation: 05/YYYY

- Complete remaining steps online to place order. During the order process, you will be
  asked to enter an email address that will become your username. At the end of the
  order, you will be asked to enter a secure password to complete the account creation.
- a. Background Check Results: See information regarding background check results:
  - Negative Criminal Background Checks: The names of all applicants and current students
    with negative criminal background checks will be forwarded to the assigned designee in
    the Division of Health Sciences and Human Services with the date of the criminal
    background check. No further action by the applicant/student or Division is required.
    Background information is sensitive, and only authorized personnel have access to
    records.
  - Affirmative Duty to Disclose: Students who have completed a background and who
    have been accepted into a program and will be placed at an off-site affiliate have an
    affirmative duty to disclose any changes to their backgrounds. This includes any charges
    that are above a misdemeanor or traffic citation. The student must report to the chair
    and assistant dean or dean within 24 hours of an incident.

If it is made known to them by a student, directors/chairs must report any violations on a student's record to the dean or associate dean for review. Current felony/misdemeanor convictions shall be made known within 24 hours of the conviction as evidenced by court documentation to the Dean or Assistant Dean of Health Sciences and Human Services.

The assistant dean or dean (or designee) shall meet with the student within two business days.

• Positive Criminal Background Checks: Having a felony/misdemeanor conviction may preclude the student continuing in the program due to the inability to participate in the off-site educational component of the program. The background check may not be cleared if there are any arrests with convictions in the last 7 years, misdemeanor, or felony, or if the student is not completely off probation for any crime. Traffic violations are okay. A significant finding on these reports may impact the student's ability to progress through the program. Any applicant/student whose report indicates a positive result in their criminal background check will receive notification by email and certified letter from the HSHS Division office within seven (7) business days. Applicants/students

are required within seven (7) business days of the emailed notification to schedule a time to discuss the findings with the assistant dean or dean/designee with the HSHS Division. Following that meeting, the applicant/student will be notified of the decision within seven (7) business days regarding whether the applicant/student may continue, begin the program, or be dismissed from the program in which they are enrolled. Any variation of this policy must be approved in advance by the assistant dean or dean.

b. Drug Screen: Within 24 business hours of your order being placed, Castle Branch will register you to take your lab test with a lab in your area. We will communicate your registration information to you within your account or via an email. You will be responsible for scheduling your appointment at the designated collection site and providing your registration information at the time of collection. The collection site will ship your specimen to the lab. A negative test result will report out to you within 3 days from collection. If the test is non-negative it will transmit to a Medical Review Officer (MRO) to review. The MRO will contact you if they need information that would impact the result of your test. You will be contacted via the phone number you entered during order placement. You will also be able to view the "Pending MRO" status and the contact information for the MRO within your drug test To-Do List item. Test that goes through an MRO will report out to you within 5-7 days from collection.

Substances collected: Alcohol, Ethyl (U), Amphetamines (1000ng/mL Screen), Barbiturates, Benzodiazepines, Cocaine Metabolites, Marijuana Metabolites (50 ng/mL Screen), Methadone, Opiates (2000 NG/ML Screen), Phencyclidine

\*Results do not need to be submitted. The results are sent to the Program Assistant electronically once you have completed everything.

2. CPR/BLS CERTIFICATION (Costs ~\$60) - Upload proof (card) in CastleBranch and eValue by December 1st.

Students must possess a current and valid American Heart Association Basic Life Support Healthcare Provider (HCP) card from an authorized American Heart Association Training Center at all times during the externship. The required course is called Basic Life Support for Healthcare Providers, only through the American Heart Association (not Red Cross). Students need to go online to find a class through AHA.Courses may be located at <a href="https://www.heart.org">www.heart.org</a> (click on "CPR & ECC"). Some local AHA training centers include:

ORGANIZATION	CITY	WEBSITE	PHONE
The CPR Lady	Irvine	http://www.thecprlady.net	949.651.1020
OC Safety	Orange	http://ocsafety.com	714.960.1911
Lifeline Healthcare Ed.	Mission Viejo	http://lifelinecpr.com/	949.347.0247
Center for Health. Ed.	Riverside	http://www.healthcareeducation.org	951.782.8200

3. **MEDICAL INSURANCE** - Upload proof (card) in CastleBranch and eValue by December 1st. All students must provide proof of current medical insurance with time periods. Coverage can include private insurance, MediCal, Cal-Optima, Medicare, insurances obtained through the exchanges, and other insurance.

4. HEALTH CENTER/PROGRAM VERIFICATION CLEARANCE - Upload Program Verification Clearance Letter in CastleBranch and eValue by December 1<sup>st</sup>. All students must have a physical completed and Program Verification Clearance Letter prior to the start of professional practice experience. These can be done either at <u>Saddleback College's Student Health Center</u> or via a private physician. Costs are dependent on provider costs for these services and the number of immunizations required. If all requirements are not met by the deadlines provided, you may not be able to enroll into HIT130.

It may take up to 4 weeks just to complete the required type of TB test since it must be done twice (2-stepTB test). Titers (blood levels) may take up to 2 weeks to complete, depending upon availability of appointments and your requirements.

To have everything completed by the December 1<sup>st</sup> deadline, it is best to begin the health clearance process by June 1<sup>st</sup> as this process can take up to 6 months to complete.

- a. Must be completed using the official health exam packet. See forms in Appendix.
- b. In the health exam packet, there is a small section for you to complete regarding your medical history *before* seeing a physician.
- c. You may do one of the following:
  - Schedule an exam with your regular physician. A medical clearance obtained outside by a private physician may be faxed to the Saddleback College's Student Health Center private fax: (949) 584-4227.
  - Schedule an exam with the Student Health Center (949-582-4606). You must be registered and/or currently enrolled to make an appointment with the Student Health Center.
  - Schedule a <u>Telehealth</u> visit. (See Telehealth Instructions in the Appendix).
- d. You must make an appointment with the Student Health Center RN for sign-off and Program Verification Clearance Letter regardless of where the medical services were performed. Once the Student Health Center signs off the Program Verification Clearance Letter, it must be sent to the HSHS Office. Please contact the HIT Project Specialist—Laura Rutman at (949) 582-4731.
- 5. **COVID-19 IMMUNIZATION** Upload Proof of Covid-19 vaccines in CastleBranch and eValue by December 1<sup>st</sup>. California Department of Public Health requires students who are placed at healthcare facilities and are working to be fully immunized. Students who do not consent may not be eligible for placement at the site and may not be able to complete the program.

Proof of vaccination status may be provided through any **one** of the following methods:

- a. COVID-19 Vaccination Record Card (issued by the Department of Health and Human Services Centers for Disease Control & Prevention or WHO Yellow Card) which includes name of person vaccinated, type of vaccine provided, and date last dose administered).
- b. Photo of a Vaccination Record Card as a separate document.

- c. Documentation of COVID-19 vaccination from a health care provider.
- d. Digital record that includes a QR code that when scanned by a SMART Health Card reader displays to the reader client name, date of birth, vaccine dates and vaccine type. The QR code must also confirm the vaccine record as an official record of the state of California.
- 6. **LIABILITY INSURANCE (Costs ~ \$25)** Upload in CastleBranch by December 1st. This is a special liability insurance policy which is required to protect the externship site if the student is injured at their facility. This should not be confused with health insurance. Professional liability insurance must be obtained from Healthcare Providers Service Organization (HPSO):
  - a. Go to <a href="http://www.hpso.com/">http://www.hpso.com/</a>, click on "Apply Now" (top of page), then click on "Professional Liability Insurance Quick Quote." You will be applying as a student, and your area of study (dropdown menu) is "Medical Records Technician/Technologist."
  - b. Keep the original copy for your records.
- 7. **FERPA RELEASE FORM** Sign and upload in CastleBranch and sign in eValue by December 1st. All students need to sign the release of their education records to Saddleback affiliates for the purpose of keeping them informed about their educational placement at the facility. Students who do not consent to release such records may not be eligible for placement at the site and may not be able to complete the program.
- 8. **ORIENTATION MEETING** Meet with the PPE Coordinator to:
  - a. Ensure all pre-PPE requirements and documentation are completed
  - b. Confirm schedule (dates, times, location)
  - c. Review PPE manual, including policies and expectations
  - d. Review site-specific policies and expectations
- 9. **GUIDANCE** Students shall notify the PPE Coordinator of any problems, concerns, or any other issues as soon as possible before or during the externship so that corrective actions may be taken immediately.
- 10. **HEALTH/SAFETY/SECURITY** As part of health, safety, and security policies, ensure that you receive preparedness orientation from your clinical site for cases of weather, fire, or shooter. Include details ofhealth and safety orientation in activity log.

Students must keep track of their coursework and eligibility for HIT 130. Starting June 1st prior to their possible eligibility for the Spring HIT 130, students must create an account with CastleBranch and eValue and start uploading the required clearances and complete by December 1st. Students can see the HIT Clinical Practicum Requirements webpage for information on the CastleBranch clearance process and PPE. It is the student's responsibility to start their clearances if they are on track to meeting all the course eligibility requirements. All clearances must be current (and not expired for the entire duration of the Spring externship. Any expired clearances will need to be repeated.

The HIT Department will review the clearances uploaded in CastleBranch and eValue and check student's transcript to determine provisional eligibility. If student is deemed to be provisionally

eligible based upon the transcript, the HIT Department Chair will add the student to the list for mapping with a site. **This does not guarantee the student's eligibility for the HIT 130 course**.

### **B.** Site Responsibilities

- 1. Provide HIM processes to be experienced by the student.
- 2. Provide adequate clinical supervision of the student.
- 3. Adhere to the requirements specified in the contract.
- 4. Refrain from allowing students to take the responsibility of, or replace, qualified staff. However, after demonstrating proficiency, students may perform procedures with careful supervision.
- 5. Provide an emergency preparedness orientation for cases of weather, fire, or shooter.

### C. Site Supervisor Responsibilities

- 1. Provide the student pertinent information when the student calls prior to the beginning of the externship(e.g., orientation, parking information, photo identification badge).
- 2. Conduct a brief tour of the facility, a detailed tour of the HIM Department, and introductions to the employees and supervisors to orient the student and make him/her feel welcome.
- 3. Provide an emergency preparedness orientation for cases of weather, fire, or shooter.
- 4. Establish a schedule and assign projects and tasks. It is recommended that the Supervisor meet periodically with the student to discuss progress.
- 5. Monitor the student's performance during the externship by calling or visiting the student and conferring with the Site Supervisor.
- 6. Discuss any questions or concerns that arise during the externship with the PPE Coordinator as soon as practical, if necessary.
- 7. Complete the "Supervisor's Evaluation of Student" form and either give it to the student or send it to the PPE Coordinator within two weeks of completion of the externship. It is recommended that the evaluation be reviewed with the student since input from each Supervisor is an essential part of the evaluation process. If given to the student, it is the student's responsibility to be sure the PPE Coordinator receives the original evaluation form.
- 8. Apply grading standards comparable to those of the academic environment. Questions regarding grading should be referred to the PPE Coordinator.

### **D. PPE Coordinator Responsibilities**

- 1. Develop and coordinate externship schedules with PPE sites.
- 2. Ensure all students are registered in HIT 130.
- 3. Confirm all students have completed all pre-externship requirements with documentation.
- 4. Conduct pre-externship orientation sessions, including thorough review of PPE Manual.
- 5. Perform site visits and confer with Site Supervisors as warranted.

\*\*\* The PPE Coordinator shall be designated by, and report directly to, the HIT Program Director. The HIT facultyinstructor performing the role of PPE Coordinator is subject to change according to program needs.

### III. POLICIES & EXPECTATIONS

HIT students are required to adhere to all the rules, requirements, policies, and expectations of the SaddlebackCollege Student Handbook. The following are additional guidelines for PPE:

### **ATTENDANCE AND ABSENCES**

100% attendance and punctuality are required during the externship period. 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 theschool policy and at the discretion of the site. If a student is unable to work on a specified day, it is his orher responsibility to notify and set up arrangements to make up the missed time with both the PPE site manager and academic PPE coordinator. Students must complete 50 hours at the clinical site.

Although every effort should be made to arrive at the site on time, if a student is running late, the PPE site manager must be contacted with an estimated arrival time. If departing early, be sure the arrangement is agreed to by the PPE 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.

A student's absence places burdens on the clinical site's HIM department. The staff is prepared for the student's arrival and their schedules have been adjusted accordingly. Students must strive to positive relationships with externship sites.

**APPEARANCE** – Adhere to the facility's dress code. Although you have a general right to express your individuality through the way you groom and dress, employers have a right not to place you if it does not conform to their dress code. Similarly, the organizations that are gracious enough to provide SaddlebackCollege HIT students clinical experience have a right to refuse any student who dresses or appears in a manner that does not meet their standards. So, please use your common sense and reasonableness in your dressing and grooming practices. Unless the Site Supervisor directs otherwise, it is expected that thestudent will dress as "professional casual."

Students should ask if there are questions regarding proper attire and appearance and discuss them with the academic program director or site manager.

**ATTITUDE AND CONDUCT**— Clinical externships provide students an invaluable opportunity to learn new skills and refine skills they already have under the supervision of HIM professionals who are committed to helping the HIM professionals of the future. These dedicated people do not receive any additional compensation even though their hours and workload are increased by mentoring HIT students. Your appreciation of this fact and resulting grateful attitude will be critical to the success of this experience.

A strong desire to learn while contributing to the mission of the organization, along with a positive outlookwill help make this a good experience for you. Students should treat all externship site employees and HIM professionals and staff with respect, and work in a spirit of cooperation, collaboration, and teamwork. It is not unusual for a clinical experience to turn into a job or an excellent reference for job applications in the future.

Students should demonstrate initiative by completing activities as assigned, asking appropriate questionsfor clarification as needed and/or research as necessary from prior educational materials to complete assignments.

The expectation of professional behavior in class and during externships cannot be overemphasized. *Ethical, professional, courteous, and appropriate behavior and speech is always expected.* HIT students represent Saddleback College, the Health Sciences & Human Services Division, the HIT Program, and the HIM profession, and therefore must conduct themselves accordingly. When you enter a relationship with a clinical site, you are being evaluated not only for your performance, but also for the quality of your education, your communication and interpersonal skills, and your preparation for working in a professional environment. Students need to follow <a href="https://example.com/AHIMA">AHIMA Code of Ethics</a> and the site's policies.

**PRIVACY & SECURITY** – Students must respect the confidentiality of patient information regardless of thesource. Any violation of the clinical site's privacy and security policy, HIPAA, or the HIT program Performance Agreement will be grounds for disciplinary action. A violation of the clinical externship site's privacy and security policies will result in termination of the student's externship at the discretion of the Site Supervisor.

**SAFETY** – This includes patient safety and emergency preparedness including fire safety, active shooter, earthquake, and other weather-related preparedness.

**ELECTRONIC COMMUNICATION** – These include phone calls, texting, chatting, emails, and social media activity.

- **Personal Communications**: Please follow the clinical site's policy on personal communication during on site hours. Generally, these should only be conducted during designated break periods unless a legitimate emergency exists.
- Employment Related Communications: Please check and follow site guidelines. Many students have jobs outside of their school responsibilities that require communication with their employer. However, it is not appropriate to conduct business related to your employment during your externship, except during designated break periods. Your job responsibilities should not interfere with your externship. If this is not possible, then this may not be the right time for you to participate in a clinical externship.
- **Social Media, Websites, and Devices**: Most clinical sites will have restrictions on the use of social media websites and devices during the clinical rotation. Avoid sharing or disseminating confidential information about patients, HIPAA-protected information, and FERPA protected information.
- Unauthorized Recording: The use by any person, including a student, of any electronic listening or recording device in any classroom without the prior consent of the instructor or site manager is prohibited, except as necessary to provide reasonable auxiliary aids and academic adjustments to

disabled students. Any person, other than a student who willfully violates this section shall be guilty of a misdemeanor.

### FAILING GRADE, WITHDRAWAL, OR LEAVE OF ABSENCE

A student who enrolls into HIT 130 will need to complete the 50-hour rotation at the clinical and the didactic (online) portion of the course. If the student gets a failing grade (below 70%) or withdraws from the course, then the student will need to wait until HIT 130 is offered the following year to repeat. In that case, the clearances may expire and need to be repeated due to recency requirements.

A student who is unable to complete the 50-hours of the clinical rotation after starting the on-site hours and has completed most of HIT 130 in good standing must notify the HIT Department Chair in writing of a valid reason for a "Leave of Absence" (LOA) pending approval for the LOA to receive an Incomplete Grade. If a LOA is granted, student is required to finish the clinical hours within a year of the LOA and complete HIT program. Clearances may expire and may need to be repeated.

If these requirements are not met within one year, the student will need to start the HIT program over with the current recency requirements.

Inappropriate behavior that may result in dismissal from the clinical site and/or failing grade for the course include:

- Safety violations
- HIPAA violations
- Cheating
- Copyright violations
- Fraud, dishonesty
- Unexcused absences
- Excessive tardiness
- Leave of Absence breaches
- Ditching (an externship site early without permission)
- Profane language
- Sexual harassment
- Damaging property
- Illegal or inappropriate use of drugs and/or alcohol
- Theft
- Poor hygiene
- Failure to report injuries
- Failure to follow school or clinical externship site policies or procedures
- Disobedience to clinical externship site personnel

The dismissed/failing student may be allowed a remediation process to allow a re-enrollment into HIT 130 for the following year when it is offered again. In that case, the clearances may expire and need to be repeated due to recency requirements.

### INFORMAL AND FORMAL GRIEVANCE PROCESS - CURRENT HEALTH SCIENCE STUDENT PROCESS

Should problems arise during the externship; the PPE Coordinator will make every effort to resolve the

situation with the student and the Site Supervisor. If it is not practical to resolve a scheduling problem, the PPE Coordinator has the discretion to reassign the student to another externship site based upon availability. However, inappropriate behaviors such as the ones listed above may result in a failing grade for the course and/or dismissal from the clinical site.

Students who wish to file a grievance may follow due process guidelines found in the program's handbook (informal) and/or District AP 5530 (formal). The three scenarios described below trigger HSHS due process.

### AP 5530 Process

The District AP 5530 is the formal grievance process and is applicable to the District's enumerated issues (i.e., grades, student disciplinary actions). Students have the option to use the HSHS informal process before using the formal District process.

### Program Formal Grievance Process

Student conduct may initiate sanctions and grievances processes that are not covered under the District AP 5530. This occurs when a student breaches the department policies and regulations (i.e., dismissals for patient safety violations, failures in the remediation processes, HIPAA violations, LOA breaches, re-admission denials and so on).

### Dual Grievance Process

Students should be aware that parallel process for disciplinary matters can occur, and they must file appeals through both processes. For example, if a student is intoxicated at a clinical site, AP 5530 is triggered along with the program's policy (i.e., breach of behaviors at the clinical site, violation of patient safety). In such a case, a student could be dismissed from the program while also going through the District disciplinary process and receiving District related sanctions. In these cases, students may need to address the District disciplinary process and grievance procedures while also activating the HSHS grievance process for a program dismissal.

### IV. LEARNING OBJECTIVES

### A. Inpatient Learning Objectives

Student will:

- 1. Describe the structure and function of the health Information department
- 2. Describe the flow of health information within the healthcare environment
- 3. Discuss organization's compliance with federal and state laws, and standards of accrediting hodies
- 4. Explain the storage and retention procedures of the health record
- 5. Review the medical record for completeness
- 6. Explain the release of information according to applicable laws, protocols, and standards
- 7. Comply with policies and procedures for completion of records and discharge analysis

- 8. Explain any quality improvement or other projects related to the healthcare
- 9. Explain any risk management activities
- 10. Describe the coding, the CDI, and the revenue cycle management of the organization
- 11. Discuss the use of various reports generated in the healthcare organization

### **B.** Outpatient Learning Objectives

### Student will:

- 1. Discuss the management health information in the various ambulatory settings
- 2. Describe how the facility's health information system is organized
- 3. Describe the structure, content, and use of medical records
- 4. Explain the retention and storage policies of the medical record
- 5. Explain the release of information process including compliance with federal and state laws
- 6. Describe the use electronic media in the and the workflows health care facility
- 7. Apply relevant federal and state laws regarding health information
- 8. Identify sources of funding and types of reimbursement for the facility
- 9. Describe the revenue cycle management of the organization
- 10. Explain the types of regulation/accreditations that affects the organization
- 11. Describe the projects that the facility is involved with (e.g., EHR transition, meaningful use)
- 12. Describe the type of clientele served by the facility

## APPENDIX FORMS



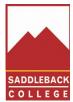
**HEALTH INFORMATION TECHNOLOGY** 

STUDENT NAME

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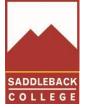
	CastleBranch Compliance Tracker – Create a CastleBranch account to purchase compliance tracker  AHA BLS Provider Course – Successfully complete an approved AHA BLS Provider course  Health Exam – Have a health exam performed  COVID-19 Vaccine – Complete COVID-19 vaccination requirements  Background Check & Drug Test – Have a background check and drug test performed  Liability Insurance – Obtain professional liability insurance  Acknowledgement of PPE Manual –Check-off in eValue  Site-Specific Requirements – Comply with any additional site-specific pre-externship requirements and documentation  Registration – Waitlist in HIT 130 Directed Practice enroll within 24 hours when the APC is provided to you
DDE	Clinical Site Contact – Contact clinical site and plan on-site schedule
	E-EXTERNSHIP DOCUMENTATION
	oad the following in CastleBranch and eValue:
	AHA BLS Provider Card – A copy of the front and back of the card  Medical Insurance – Provide proof of current medical insurance with time periods
	Health Clearance Form – Signed and issued by Student Health Center
	COVID-19 Vaccination Disclosure - Provide proof of COVID-19 vaccination (See Appendix)
	Liability Insurance – A copy of the HPSO professional liability insurance certificate
	FERPA Release (See form in CastleBranch – sign and upload)
Ada	ditionally, upload the following in eValue:
	Resume
	Contact Information Form (See form in Appendix)
	Site Specific Documentation – Signed and dated, if applicable
	Student Externship Planner (See form in Appendix) – Confirm schedule (dates, times, location)
PRE	E-EXTERNSHIP ORIENTATION MEETING — Meet with the PPE Coordinator to review:
	Pre-Externship Requirements – Ensure all pre-PPE requirements and documentation are completed
	Student Externship Planner (See form in Appendix) – Confirm schedule (dates, times, location)
	General Expectations – Review PPE manual, including policies and expectations
	Specific Expectations – Review site-specific policies and expectations
POS	ST-EXTERNSHIP DOCUMENTATION – Submit the following completed documents via Canvas to and to the PPE coordinator:
	Student Activity Log (See form in Appendix)
	Student's Evaluation of Externship (See form in Appendix)
	Supervisor's Evaluation of Student, Competency Outcomes (See form in Appendix)
	Supervisor's Evaluation of Student, Skills (See form in Appendix)

### **HEALTH INFORMATION TECHNOLOGY**



### **PPE STUDENT CONTACT INFORMATION**

SADDLEBACK C O L L E G E	STUDENT BASIC INFO
STUDENT NAME	
MOBILE PHONE	
OTHER PHONE	
E-MAIL	
	STUDENT MAILING ADDRESS
STREET ADDRESS	
CITY, STATE, ZIP CODE	
	EMERGENCY CONTACT INFO
CONTACT PERSON	
RELATIONSHIP	
MOBILE PHONE	
OTHER PHONE	
CITY, STATE, ZIP CODE	
	STUDENT HEALTH INFO
PHYSICIAN	
TELEPHONE	
CITY, STATE, ZIP CODE	
	NOTES
•	



### **Student Health and Wellness Center**

28000 Marguerite Parkway SSC 177• Mission Viejo • 92692-3635 Phone 1-949-582-4606 • Fax 1-949-582-4227

Telehealth: https://studenthealth.saddleback.edu

### MANDATORY HEALTH ASSESSMENT AND IMMUNITY STATUS REQUIREMENTS FOR HEALTH SCIENCE PROGRAMS

### **Instructions to Obtain A Program Verification Clearance Letter:**

- > It is <u>necessary</u> for you to submit copies of <u>ALL</u> of your required medical records to the Student Health Center to receive a Program Clearance Letter for admission into the health science programs.
- First make a Telehealth visit at <a href="https://studenthealth.saddleback.edu">https://studenthealth.saddleback.edu</a> with the RN to review requirements, your options and answer any questions you may have. (You must apply to Saddleback College and have an active Saddleback email to make an appointment with the Student Health Center).
- Titer draws for proof of immunity may take several months to complete, depending upon availability of appointments and your requirements. You must complete the required health assessments and establish immunization/titer status by due date provided by your Program Chair.
- These requirements can be completed by the Student Health Center or by your Health Care Provider, however, you MUST make an appointment with the Student Health Center RN for the Program Verification Clearance Letter. Copies of all immunization/titers/physical records will be required.

### **Required Laboratory Tests:**

You <u>MUST provide documentation of immunity</u> to the following diseases by blood testing (positive titer) results - titer results do not have a expiration date:

- ➤ Measles (Rubeola)
- **≻** Mumps
- ➤ Rubella
- > Varicella
- > Hepatitis B

Required Tuberculosis (TB) Screening— (Either TST, IGRA or Chest X-ray): \* Health Science Programs are required to provide current Annual Negative TB Proof.

Two-step TST(tuberculin skin test) = (2 TST's minimum of 1 week apart, which is 4 visits): is required if you have not had a TST skin test within the past year.

OR

- One-Step: Proof of two negative TST's in the past 2 consecutive years OR
- > Proof of a current negative QuantiFERON Gold or T-Spot blood test
- ➤ OR
- ➤ Proof of a current negative TB chest X-Ray

### Immunization with the following vaccine are required.

> TDAP, COVID (full immunity) & Seasonal Flu Vaccines

Hospitals require the seasonal flu shot. IF you decline, you must wear a mask at all times while providing patient care from Oct 1<sup>st</sup> through March 31<sup>st</sup>. Any declination will result in a not-cleared status and will require you to meet with the department chair/dean to determine if you can be placed and proceed in the program.

**Physical exams** are required by a licensed health care professional. You must provide documentation of immunity to the following diseases by blood test (titer) results. If you are in need of any immunizations or titers you may obtain them at the Student Health Center. The costs are listed below. A checklist is also included for you to use as a guide.

Vaccines		Blood Tests
TST	\$20	QuantiFERON gold \$55
TDAP 1 dose in the past 10 years	\$75/dose	None N/A
(8 years for RN students)		
MMR (2 doses in lifetime,	\$85/dose	MMR titer \$50
minimum of 30 days apart)		
Varicella (2 doses in lifetime,	\$160/dose	Varicella titer \$15
Minimum of 30 days apart)	·	
Hepatitis B (3 doses over a 6-		Hepatitis B titer \$15
month period in lifetime)		
Hepatitis B (2 doses over a 2	\$135/dose	
month period in lifetime)		
Seasonal flu shot	\$20	
COVID Vaccine	Free	
Physical exam	\$20	

### **Checklist for Required Documentation:**

Physical exam completed by a licensed healthcare provider.
TST: 2 current negative TST within the past year or 2 negative TST in the past 2 consecutive
years OR a negative QuantiFERON Gold/T-Spot blood test
OR current negative TB chest x-ray
(*Has to last through the current semester, except RN and MLT students-has to last
through the full year)
Measles (Rubeola), Mumps, Rubella (MMR): Proof of immunity via blood test (titer).
Varicella: Proof of immunity via blood test (titer).
Hep B: Proof of immunity via blood test (titer).
TDAP: 1 dose in the past 10 years (*8 years for RN students).
Seasonal flu vaccine
COVID vaccine and full immunization (2 weeks post last vaccination date on documentation).

**Attention Veterans:** If you are using your G.I. Bill education benefit, the VA will pay for your required health assessment and vaccines at the Saddleback College Student Health Center. Contact the Veterans Office at 1(949) 582.4870 **prior** to scheduling your appointment. You will not be reimbursed if you pay for the health assessment or vaccines before contacting the Veterans Office.



### Saddleback College Health Science and Human Services Physical Evaluation and Recommendation

pplicant Name:		Da	ate of Birth:
To the Applicant - Compl	ete the Medical H	listory below BF	EFORE your appointment:
Have you ever had or do you curr	rently have?	NO	Yes (explain)
Impaired hearing	ichtry have.	110	res (explain)
Impaired vision			
Shortness of breath on exertion	n		
Pain, pressure or tightness in t			
Fainting spells, dizziness or bl			
Excessive weakness or fatigue			
Epilepsy or seizures			
Severe depression and/or anxi	etv		
Addiction to narcotics, alcoho		gs	
Low back pain or a "slipped of		55	
Joint pain			
Documentation: To Be Completed: OD 20/ OS 20/	by Medical Provid Check one:	ler ONLY  □ Corrected	□ Uncorrected
Areas evaluated	Normal	Abn	ormal/Findings
Eyes			
Ears, Nose, Throat			
Heart, Lungs			
Spine			
Range of Motion:			
Back/Extremities			
Neurological Status			
Emotional Status			
Saddleback College Health Science	ther Licensed Hea ce and Human Ser am placement: Stud	lthcare Provider vices Programs. dent must obtain	ached Advisory Statement and and is qualified for participation in written medical clearance from a p
Not qualified for program placem  ** Provider's Signatu		ing reasons:	
hereby authorize release of all a	•		Provider's Office Stamp

Applicant's Signature

# Saddleback College

# Advisory Statement to the Licensed Health Care Provider

emotional abilities required of the student for success in the Health Sciences Programs: individual student's wellbeing and provide for the safety of each patient/client placed in his/her care. The following are basic physical and In the best interest of our students, please be aware that certain physical, emotional and learning abilities are necessary in order to protect the

	Lifting	Lifting	Standing & Walking	Activity
Carrying Less than 50%	Up to 75%	Up to 30 times a day:	& Less than 75% or 3-5 miles	Time frame bases off a 12-hour clinical day
<ul> <li>carrying less than 10 lbs.</li> </ul>	<ul> <li>assisting patient movement:</li> <li>average patient weight:</li> <li>150-200 lbs.</li> </ul>	<ul> <li>equipment up to 35 lbs</li> <li>floor to Knee</li> <li>knee to waist</li> <li>waist to shoulder</li> </ul>	<ul> <li>on carpet, tile, linoleum, or cement</li> </ul>	Description
• charts	<ul> <li>transferring or turning patients</li> </ul>	<ul> <li>trays</li> <li>continuous passive motion machines</li> <li>pulse oximeters</li> <li>patient controlled analgesia pumps</li> </ul>	<ul> <li>providing care</li> <li>obtaining supplies &amp; specimens</li> <li>monitoring / charting patient response</li> <li>managing / coordinating patient care.</li> </ul>	Examples of Activity/Equipment

Activity Sitting	Time frame bases off a 12-hour clinical day ∪p to 50%	• communication / documentation	<ul> <li>Examples of Activity/Equipment</li> <li>working on computers</li> <li>answering phones</li> </ul>
Pushing & Pulling	Up to 75%	moving / adjusting equipment	
Balancing & Climbing	Less than 75%	<ul> <li>activities requiring good body mechanics</li> </ul>	
Stooping & Kneeling	Up to 50%		
Bending	Up to 75%	<ul> <li>at the waist to get supplies, monitor patients, administering medications</li> </ul>	
Crouching & crawling	Less than 25%	<ul> <li>retrieving or adjusting equipment on the floor</li> </ul>	

Activity	Time frame bases off a 12-hour clinical day	Description	Examples of Activity/Equipment
Reaching & Stretching	Up to 75%		<ul> <li>hanging &amp; removing IV bottles/bags</li> <li>gathering supplies</li> <li>connecting equipment</li> <li>assisting with patient care</li> <li>performing transfers &amp; positioning.</li> </ul>
Twisting & Turning	Up to 50%	<ul><li>twisting at waist</li><li>turning neck</li></ul>	<ul> <li>while gathering supplies</li> <li>operating equipment</li> <li>checking IV lines</li> <li>bathing patients</li> <li>assisting patients to walk</li> </ul>
Talking	Up to 90%	<ul> <li>ability to speak in English</li> </ul>	<ul> <li>ability to communicate with a wide variety of people and easily understood.</li> </ul>
Hearing	Up to 90%	<ul> <li>hear and correctly interpret what is heard with patient assessment</li> </ul>	Includes but not limited to:  • taking verbal or telephone orders  • communicating with patients, visitors & other members of the health care team  • physical assessment of cardiovascular, pulmonary & gastrointestinal sounds  • analysis of patient monitor alarms
Manual Dexterity		<ul> <li>Fine &amp; gross dexterity of the hand and fingers</li> </ul>	<ul><li>grasping equipment</li><li>opening medication packages</li></ul>

Activity	Time frame bases off a	Description	Examples of Activity/Equipment
•	12-hour clinical day		
General		Motor ability	<ul> <li>upper extremity: shoulder,</li> </ul>
Extremity			elbow, wrist, hand, fingers and
Motion:			thumb
			<ul> <li>lower extremity: hip, knee,</li> </ul>
			ankle, foot and toes
			<ul> <li>neck: turn, flex and extend</li> </ul>
Feeling		<ul> <li>Sensory ability</li> </ul>	<ul> <li>sensation to heat &amp; cold when</li> </ul>
			assessing patients/clients
			<ul> <li>capacity to feel heat, cold, pain</li> </ul>
			& pressure to the self,
			protecting from personal injury
			Read & interpret charts, reports,
Vision		<ul> <li>Visual Acuity</li> </ul>	monitor equipment. Detect
			patients' signs and symptoms (color
			of skin, wounds, drainage and other
			body fluids, infusion sites). Detect a
			change in patient/client status
Olfaction		<ul> <li>Unusual Odor Detection</li> </ul>	<ul> <li>identify abnormal scents</li> </ul>
			associated with numerous body
			fluids, wounds and
			patients/clients with casts or
			other appliances
Emotional		Emotional Stability	emotionally stable under normal
			and stressful circumstance
			encountered in the health care
			setting.

### SADDLEBACK COLLEGE STUDENT HEALTH CENTER

Confidentiality Consent for Treatment Acknowledgement of Notice of Privacy Practices

Welcome to the Saddleback College Student Health Center (SHC). Your signature below indicates you are aware of the following policies and procedures regarding patient confidentiality, informed consent, consent for care using Telehealth, consent for treatment by a physician, registered nurse, clinical psychologist, or psychology intern therapistunder the direct supervision of a licensed clinical psychologist. Additionally, your consent agrees to Medi-Cal and Family Pact billing and notice of privacy practices.

### CONFIDENTIALITY:

Information disclosed to Saddleback College Student Health Center staff is strictly confidential and will not be released to any third party without written authorization, except where required or permitted by law. Exceptions to confidentiality include, but are not limited to, reporting suspected child abuse, elder abuse, or dependent adult abuse; if the provider has knowledge or suspects that the patient may be a danger to her or himself or to another person or property; or if the patient is gravely disabled; or disclosure is court ordered. In some cases, photo documentation may be utilized in your medical record. In the event a student is injured, or hospitalized, this document will serve as written consent to share confidential patient information as needed with necessary college or healthcare personnel.

### **INFORMED CONSENT:**

You have the right to be informed about medical and psychological treatment options and have the right to consent toor refuse any proposed treatment or test. You will be provided with a diagnosis or suspected diagnosis. You will be informed of the nature, purpose, potential risks, complications and/or side effects of available treatment options. You will be informed of the possible consequences if medical advice/treatment is not followed.

### CONSENT FOR TREATMENT BY A MULTIDISCIPLINARY TEAM:

The SHC staff functions as a multidisciplinary team for the purpose of maintaining continuity of care and providing themost effective and efficient treatment possible. Under certain circumstances, medical and psychological staff will exchange information regarding a patient. This exchange will only occur when it has been determined that is in the best interest of the patient, and only relevant information necessary to treat the patient will be exchanged.

Psychotherapy services at the Student Health Center are provided by doctoral level psychology interns under the direct supervision of a licensed psychologist. Your treatment including Telehealth incorporates the practice of health care delivery, diagnosis, consultation, treatment, transfer of medical data, and education using interactive audio, video, or data communications including audio and or video recording of psychological treatment.

### **CANCELLATION POLICY:**

In order to cancel or reschedule any SHC appointment, the patient must contact SHC <u>at least 24 hours</u> in advance of the scheduled appointment. Failure to do so will result in your appointment being counted as a missed appointment. The SHC requests that patients must check in for their scheduled appointments at least 10 minutes prior to their appointment. Should the patient be late to their appointment by 15 minutes or more, the staff reserves the right to cancel and count the appointment as a missed appointment. Three missed appointments will disqualify you from receiving medical or therapy appointments for the semester. Students will still be eligible for crisis and referral services.

Please note: The Saddleback College Student Health Center is not a 24-hour care facility. If an emergency occurs afterbusiness hours, seek immediate medical or psychological attention at the nearest emergency room or call 911.

The Saddleback College Student Health Center will provide you with a paper copy of their Notice of Privacy Practices atyour request. This notice contains information about how your Protected Health Information (PHI) will be protected andyour rights as a patient.

I, the undersigned patient and/or legal guardian, authorize treatment including engaging in telehealth with staff atSaddleback College Student Health Center and authorizes any billing services, upon verification of eligibility for Medi-Cal and/or Family Fact to submit claims for services to me and/or my minor children through electronic, paper, or computer media. I have read, understand, and agree to all of the above.

Print Name	Date
Signature	Student ID#

SADDLEBACK

### SADDLEBACK COLLEGE

28000 Marguerite Parkway \* Mission Viejo \* 92692-3635 (949) 582-4325 \* www.saddleback.edu

### SADDLEBACK COLLEGE STUDENT HEALTH CENTER

### **Telehealth Instructions**

Telehealth appointments are now available to review the program clearance requirements.

- 1. Log onto https://studenthealth.saddleback.edu to have a zoom appointment and speak to a Registered Nurse about requirements and to discuss options.
- 2. Fax immunization/titer proof and the Evaluation and Recommendation form to (949)582-4227. Download a free fax app on cell phone or go to Staples, Fedex etc. to faxmedical documents.

Student Health Center is not able to receive any medical documents via email since it is not HIPAA compliant.

### To be prepared for your appointment:

- 1. Log onto https://studenthealth.saddleback.edu
- 2. Authenticate using your Saddleback email and password.
- 3. Enter in your date of birth.
- 4. Click on: Appointments
- 5. Complete Consent for Treatment and Health History forms prior to your first appointment.
- 6. To check in for your Telehealth appointment: go to Appointments and click on: Appointment Check-in. Then click OK. This notifies the health care professional ofyour arrival.
- 7. Click on: Click here to join the meeting and you and your provider will be connected.

If you have any questions, please call us at 949-582-4606 or visit our website at www.saddleback.edu/shc



SADDLEBACK

### **COVID COMPLIANCE**

California Department of Public Health requires students who are placed at healthcare facilities and are working to be fully immunized or have a signed declination and must be in full compliance with the Order by September 30, 2021. Students who are placed at facilities that allow declinations must complete the religious declination form or contact DSPS and engage in the interactive process for an accommodation. Students who have a medical declination shall be referred to Saddleback DSPS and not submit a declination form to the office.

Two-dose vaccines include: Pfizer-BioNTech or Moderna or vaccine authorized by the World Health Organization. The onedose vaccine is: Johnson and Johnson [J&J]/Janssen. All COVID-19 vaccines that are currently authorized for emergency use can be found at the following links:

- By the US Food and Drug Administration (FDA), are listed at the FDA COVID-19 Vaccines webpage.
- By the World Health Organization (WHO), are listed at the WHO COVID-19 Vaccines webpage.

The following conditions apply for all students in HSHS programs that place students in off-site facilities as defined in the Order.

- Students shall be notified of California's requirements through the department web page, handbooks, syllabus, and orientation materials.
- Students shall have a deadline to comply with providing immunization proof or submitting a declination sufficiently in advance of placement.
- Students may be exempt from the vaccination requirements only upon providing a declination form, signed by the individual, stating the student is declining vaccination based on religious beliefs or medical reasons.
- If the student needs to be excused from receiving any COVID-19 vaccine due to Qualifying Medical Reasons, the student shall go to DSPS for guidance.
  - > Per the order, to be eligible for a Qualified Medical Reasons exemption the student must provide a written statement signed by a physician, nurse practitioner, or other licensed medical professional practicing under the license of a physician stating that the individual qualifies for the exemption (but the statement should not describe the underlying medical condition or disability) and indicating the probable duration of the student's inability to receive the vaccine (or if the duration is unknown or permanent, so indicate).
- Students who decline shall test weekly (or twice weekly) and wear a surgical mask while in the facility.
  - > PCR or antigen test that either has Emergency Use Authorization by the U.S. Food and Drug Administration or be operating per the Laboratory Developed Test requirements by the U.S. Centers for Medicare and Medicaid Services. Testing must occur twice weekly for unvaccinated exempt workers in acute health care and long-term care settings, and once weekly for such workers in other health care settings.
  - > Wear a surgical mask or higher-level respirator approved by the National Institute of Occupational Safety and Health (NIOSH), such as an N95 filtering facepiece respirator, at all times while in the facility.



**HEALTH INFORMATION TECHNOLOGY PROGRAM** 

Professional Practice Experience

STUDENT NAME

### **STUDENT ACTIVITY LOG**

Students must perform a minimum total of 50 PPE hours

DATE MM/DD/YYYY	ACTIVITY	HOURS
e.g. 02/11/XXXX	List each activity for the given date in a separate row with corresponding hours. Update on same day.	
	Total Hours This Page $ ightarrow$	



**HEALTH INFORMATION TECHNOLOGY PROGRAM** 

		STUDENT NAME

**Professional Practice Experience** 

### STUDENT'S EVALUATION OF EXTERNSHIP

	Futowahin Sita Information		
	Externship Site Information		
Company Name			
Supervisor Name			
1. What were the	strengths and weaknesses of the externship site and y	our expe	ience there?
2. What aspects o	of the externship did you find most helpful and least he	elpful?	
3. What recomme	endations do you have to improve the externship expe	rience?	
Student Signature		Date:	



STUDENT NAME

### HEALTH INFORMATION TECHNOLOGY PROGRAM

**Professional Practice Experience** 

### SUPERVISOR'S EVALUATION OF STUDENT: <u>Competency</u> <u>Outcomes</u>

**Externship Site Information** 

Company Name					
Supervisor Name					
Com	petency Outcomes		Evalua	tion	HOURS
Orientation - Student wil	I complete <u>3 hours</u> of orientation to facility	□ MET	☐ NOT MET	☐ NOT EVALUATED	
_	ent - Student will complete <u>5 hours</u> in the ata (collection, analysis, accuracy, timeliness,	☐ MET	□ NOT NET	□ NOT EVALUATED	
complete 5 hours apply	quirements & Standards - Students will ying policies & procedures relating to the , compliance, and accreditation of PHI	☐ MET	□ NOT MET	☐ NOT EVALUATED	
— ·	cation Systems - Students will complete ling patient charts based upon guidelines	☐ MET	□ NOT NET	☐ NOT EVALUATED	
<b>Revenue Cycle Management (RCM) / Reimbursement</b> - Students will complete <u>5 hours</u> in activities relating to RCM		☐ MET	□ NOT M ET	☐ NOT EVALUATED	
	Release of Information (ROI) - Students will ag privacy in use and disclosure including ROI	☐ MET	□ NOT NET	☐ NOT EVALUATED	
	mprovement - Students will participate in <u>5</u> g to performance improvement including risk ion review	☐ MET	□ NOT MET	□ NOT EVALUATED	
Information Technology & Systems - Students will spend 10 hours using health information technologies including specialty systems		☐ MET	□ NOT MET	☐ NOT EVALUATED	
	Students will complete <u>3 hours</u> of activities research (including registries)	☐ MET	□ NOT NET	☐ NOT EVALUATED	
	<b>&amp; Delivery</b> - Students will participate in <u>5</u> ing to exchange of information across the	☐ MET	□ NOTM ET	□ NOT EVALUATED	
				TOTAL HOURS	

The hours specified are the minimum hours. Students are encouraged to do more hours if possible.

Student Signature	Date:	
Supervisor Signature	Date:	



**HEALTH INFORMATION TECHNOLOGY PROGRAM** 

STUDENT NAME

**Professional Practice Experience** 

### SUPERVISOR'S EVALUATION OF STUDENT: <u>Skills</u>

Externship Site Information			
Company Name			
Supervisor Name			
Skills	Evaluation	Com	nments
Basic Skills Demonstrates competency i reading, writing, and mathematics	n Satisfactory Unsatisfactory NotEvaluated		
Interpersonal Skills Works well with others; Tree people with courtesy, respe and compassion			
Communication Skills Communicates effectively w others orally and in writing	Satisfactory Unsatisfactory NotEvaluated		
Organizational Skills Allocates time and assignment efficiently; Prioritizes tasks meets deadlines			
Technology Skills Uses computers and other office equipment effectively needed for specific tasks	Satisfactory Unsatisfactory NotEvaluated		
Personal Qualities Demonstrates professionalis responsibility, self-control, initiative, and integrity	Sm, Satisfactory Unsatisfactory NotEvaluated		
Add	itional comments may b	e written on the back as r	needed
Student Signature		Date:	
Supervisor Signature		Date:	



STUDENT NAME

HEALTH INFORMATION TECHNOLOGY PROGRAM

### STUDENT EXTERNSHIP PLANNER

Please print your name in the box in the upper right corner of this form, then print the information requested for <u>all</u> items listed below and submit the <u>completed</u> form. Whenever any information changes after submitting the form, you will need to complete a new form with the updated information and submit the updated form.

STUDENT INFORMATION		
Student I.D. Number		
Student Mobile Phone Number		
Student Email Address		

EXTERNSHIP INFORMATION					
Organization (Site) Name					
Supervisor / Mentor Name					
Externship Start Date					
Projected End Date Estimate based on start date and hours per week					
	Monday	Tuesday	Wednesday	Thursday	Friday
Weekly Schedule  Please specify the exact start and end times for each day of the week that you plan on	START TIME:				
doing your externship (e.g., 10:00 am start time, 2:30 pm end time)	END TIME:				