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Health Services Internship Checklist – HP 480

<table>
<thead>
<tr>
<th>Step</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Complete all Certified Background requirements before applying for an internship – see Appendix 1 for codes to place an order and information about all the requirements</td>
<td></td>
</tr>
<tr>
<td>File an internship application with the Health Services Department (for Fall Interns – by April 15; for Spring Interns – by September 15; for Summer Interns – by February 15)</td>
<td></td>
</tr>
<tr>
<td>Receive an &quot;Approved for an internship&quot; email from the Health Services Department</td>
<td></td>
</tr>
<tr>
<td>Schedule a meeting with the internship Career Services Liaison</td>
<td></td>
</tr>
<tr>
<td>Have an on-site internship interview with your potential Preceptor</td>
<td></td>
</tr>
<tr>
<td>Accept an internship offer and notify the Internship Program Instructor and Career Services Liaison</td>
<td></td>
</tr>
<tr>
<td>Complete and submit the following forms to the Health Services Department:</td>
<td></td>
</tr>
<tr>
<td>Internship Work Agreement – see Appendix 2</td>
<td></td>
</tr>
<tr>
<td>Preceptor Contact Information – see Appendix 2</td>
<td></td>
</tr>
<tr>
<td>Health Services Requirements Contract – see Appendix 2</td>
<td></td>
</tr>
<tr>
<td>Receive Notice to Register – you will be emailed the CRN# and how to register</td>
<td></td>
</tr>
<tr>
<td>Register for the internship course (HP 480)</td>
<td></td>
</tr>
<tr>
<td>Post schedule to Blackboard Course site</td>
<td></td>
</tr>
<tr>
<td>Begin internship</td>
<td></td>
</tr>
<tr>
<td>By the end of your 1st week, submit your Internship Learning Goals form - see Appendix 2</td>
<td></td>
</tr>
<tr>
<td>Before your mid-term review, submit your Job Description for Internship form - see Appendix 2</td>
<td></td>
</tr>
<tr>
<td>3 weeks before midterm, submit possible dates for the review to the Career Services Liaison</td>
<td></td>
</tr>
<tr>
<td>Mid-term review</td>
<td></td>
</tr>
<tr>
<td>Post on Blackboard all Weekly Tracking Forms to the Career Services Liaison - see Appendix 2</td>
<td></td>
</tr>
<tr>
<td>Notify the Career Services Liaison upon completion of your internship</td>
<td></td>
</tr>
<tr>
<td>The Career Services Liaison will email your Preceptor an evaluation form</td>
<td></td>
</tr>
<tr>
<td>Complete all In-Class Requirements and Certified Background requirements.</td>
<td></td>
</tr>
<tr>
<td>Receive a &quot;pass&quot; or &quot;no Pass&quot; grade or and &quot;incomplete&quot; if requirements are not met from above.</td>
<td></td>
</tr>
<tr>
<td>Send your Preceptor a &quot;Thank You&quot;</td>
<td></td>
</tr>
</tbody>
</table>

This checklist will guide you through your internship. Steps are explained in the handbook.
1. **Introduction**

This handbook outlines much of the information you will need to progress through the preparation and participation in an internship. **It is your responsibility to be familiar with this information and act on the instructions without being prompted.** For a quick reference of the steps, turn to pg. 3 of the handbook to the Checklist. Detailed explanations are found in the body of the handbook.

The internship (HP 480) is required of all USI students pursuing a Bachelor’s Degree in Health Services who enrolled in the Specialty Track Option and Food and Nutrition Majors with a minor in Health Promotions & Worksite Wellness. As the culminating experience of the program, the internship offers students in Health Administration, Gerontology, Long Term Care Administration, Public Health and Worksite Wellness the opportunity to apply the theories and skill sets learned in the classroom to the real world of healthcare.

The internship is completed under the supervision of a qualified and experienced healthcare professional in the community setting. The chance to observe and share in the knowledgebase of those already working in the field offers students a bridge between the academic setting and the work world. Students are afforded the occasion to grow professionally under the supervision of a healthcare expert who recognizes the tangible contribution that can be made by an intern.

- All students admitted to a Specialty Track are required to complete HP 480 for a total of 6 credit hours (equal to 300 hours of field experience).
- Food and Nutrition majors with a Wellness Minor are required to complete HP 480 for a total of 3 credit hours (equal to 150 hours of field experience).

All internships are offered in conjunction with Association of University Programs in Health Administration (AUPHA) and/or the National Commission for Health Education Credentialing, Inc. (NCHES), along with the National Association of Colleges and Employers (NACE) which connects employers and career services professionals to provide best practices, trends, research, professional development and conferences.

2. **Planning for the Internship Experience**

   a. **Early Planning (Freshman/Sophomore)**

      - Review and consider financial viability when considering the timing of the internship
      - Schedule courses to complete pre-requisite course requirements prior to application period. A course in Microsoft Office is strongly recommended.
      - Consider your career goals and what type of internship experience might best help you prepare for your desired position after graduation.
      - Note which courses in your program interest you the most, and which health care settings you prefer.
      - Talk to other students about their internship experiences.
      - Join HOSA and discuss options with student members.
      - Discuss ideas with your academic advisor and/or instructors.
      - Attend an orientation session and look at Certified Profile requirements.
b. Later Planning/Applying (Junior/Senior)

- File an internship application (prior to the stated deadlines) with the Health Services Department.
  - Applications are available online at https://www.usi.edu/health/health-services/health-services-internship-hp480 or in the Health Services office (Room HP 2145).

- Once your application has been approved, schedule a meeting with the Internship Career Services Liaison (464-1865), months PRIOR to the desired start date (See time table in 3c). Come to this meeting prepared:
  - Know the information included in this document.
  - Bring your updated resume to the meeting
  - Identify your areas of interest and be prepared to discuss them with the Career Services Liaison.
  - Bring ideas of possible internship sites or contacts.

3. Overview of the Internship Experience

a. Purpose/Goals

The major purpose of an internship is to provide you with professional experience outside of the classroom that is consistent with your career goals. It provides you opportunity to integrate and apply what you have learned in your coursework to enhance your academic and professional development.

The goals of this experience are to:
- provide relevant and practical professional experience
- enhance understanding and application of health management or health education principles, concepts, and procedures
- establish professional contacts within the healthcare community
- strengthen oral and written communication skills
- strengthen presentation ability
- strengthen interpersonal skills
- strengthen critical thinking and problem solving skills

Internships are conducted in a professional work environment and MUST be approached as professional employment. The internship gives you an opportunity to demonstrate your ability to apply knowledge to practice.

b. Eligibility

The internship is required for:
- Students previously admitted to the Health Services Specialty Track
- Food and Nutrition majors with a Wellness minor
Your internship is to be completed near the end of your academic program so that you can apply knowledge gained from your coursework. Eligibility for participation in an internship is as follows:

### Fall Internship Applicant Requirements:
- Apply no later than April 15
- 75 hours completed
- Completed Certified Profile

### Spring Internship Applicant Requirements:
- Apply no later than Sept. 15
- 75 hours completed
- Completed Certified Profile

### Summer Internship Applicant Requirements:
- Apply no later than Feb. 15
- 75 hours completed
- Completed Certified Profile

See Pre-requisites below:

*Admitted to a Health Services Specialty Track - 2.75 GPA required
*Completion of the following courses:

<table>
<thead>
<tr>
<th>Minor</th>
<th>GERO</th>
<th>HA</th>
<th>LTCA</th>
<th>PH</th>
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<tbody>
<tr>
<td>CIS151</td>
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<td>Recommended</td>
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<tr>
<td>HP305</td>
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<tr>
<td>HP306</td>
<td></td>
<td></td>
<td></td>
<td>Required (Spring IP)</td>
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<tr>
<td>HP475</td>
<td>Recommended</td>
<td>Recommended</td>
<td>Recommended</td>
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<tr>
<td>PHIL200 or 201 or 363 or HP356</td>
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<td></td>
<td></td>
<td>Required</td>
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<tr>
<td>PH284</td>
<td>Required</td>
<td>Required</td>
<td>Required</td>
<td>Required</td>
<td>Required</td>
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</table>

- **If you are applying for two separate internships (in different semesters), you will need to fill out an application for each semester. One time application for 300 hrs. in a semester.**
- **Completion of the required Castle Branch Corp. (the parent company of CertifiedBackground) Profile. (see Appendix I)**
  - Castle Branch Corp. (the parent company of CertifiedBackground) Profile includes a background check. In the case of questionable results, students will not be admitted to the internship program until results have been reviewed by the Program Chair and/or Dean’s office.

### c. Application, Approval, and Referral Process

You should plan your class schedule and finances in order to accommodate distance learning experiences. Some internship sites may be an hour or more drive from the USI campus. Summer internships may be located in a student’s home area and in some cases, students may apply for and be awarded opportunities in specific disciplines and locations throughout the region and Tri-state area.
STEP 1:
You must complete a Health Services Internship Application to be considered for an internship no later than the dates listed below. **Those applying for the second internship must also follow these steps. If you are applying for two separate internships (in different semesters), you will need to fill out an application for each semester.**

- April 15 for the Fall Semester
- September 15 for the Spring Semester
- February 15 for the Summer Semester

These deadlines are fixed in order for the Career Services Liaison to have enough time to assist you in scheduling interviews and setting up internship sites throughout the Evansville area and other communities as needed. It may sometimes take several months for the University to put Affiliation Agreements into place, so time is of the essence in completing and submitting an application for your internship.

**Note that failure to meet these deadlines may delay your graduation date.**

Students applying for internships in a health professions setting need to be aware that they will be expected to complete the Castle Branch Corp. (the parent company of CertifiedBackground) Profile including physical exam, verification of immunizations and/or titers, TB test, flu shot, Background check, Drug Screen and other clinical requirements. **This will be at the student’s expense.**

Step 2:
After submission of the application, you will be notified via e-mail of a decision by the Health Services Department.

Step 3:
After receiving approval of your application, you should arrange an appointment with the Career Services Department Liaison to discuss the internship as one of the final steps in preparing for a job in healthcare.

Appointments with the Career Services Department, 812-464-1865, must be scheduled on the following time table:

- Before or during the month of March for the Summer semester
- Before or during the month of May for the Fall semester
- Before or during the month of October for the Spring Semester

**Failure to meet this deadline may mean that your internship will be postponed to the next semester due to inability to arrange placement in a timely manner.**

**Note:** Those applying for a continuation of the second internship with the same facility must apply and notify Career Services, in addition to the Health Services Department, and complete a second agreement as well as forming new internship goals.

The Career Services Liaison will help you augment your academic training with an appropriate internship by:
Assessing academic preparation, interests, strengths and weaknesses
Clarifying the intern’s objectives and establishing realistic expectations for the internship experience.
Designing a meaningful, goal-directed internship by aligning the needs and skills of each intern with an appropriate healthcare organization.
Agreeing on the time commitment, beginning and ending dates.
Reviewing internship logistics such as work requirements, dress code, hours, office space, and other related issues as needed.
Clarifying agency requirements such as immunizations, fingerprinting, etc.
Some agencies/facilities may require a lengthy orientation prior to the beginning of the internship. The student must plan to accommodate these requirements.

Meaningful internship experiences will offer the students:

- **Real** tasks that need to be accomplished for the healthcare agency
- Activities that are **significant**, but not critical to the functioning of the organization.
- Exposure to the **internal workings** of the healthcare organization
- Activities that can be **completed within the timeframe provided**, assuming the student puts in a reasonable amount of time and effort.
- **Tangible, measurable outcomes** for the goals established.
- **Challenges** commensurate with the student’s knowledge, skills and personal attributes.

d. **Internship Requirements and Activities**

Generally, you will be assigned at least one project to complete at your internship site. The project(s) and goals will be determined in consultation with your Site Preceptor to/at the facility.

In addition to on-site internship hours, there is an internship course that meets weekly. This course is essential to developing professional skills. You will be expected to develop goals, keep a work log, attend class meetings, submit a final reflection paper, and evaluation forms (both student and Site Preceptors).

All internship students will formally present their internship experience to their peers, faculty and staff members in a symposium setting at the conclusion of the semester.

**Note:** There are additional fees involved in the internship process. The College of Nursing and Health Professions has adopted the Castle Branch Corp. (the parent company of CertifiedBackground) Profile as the standard for verification of pre-placement documents. Fees include but are not limited to the costs for the Castle Branch Corp. (the parent company of CertifiedBackground) Check, CPR training (which will be offered within the class time setting), the Dinner View Experience, and any other requirements set forth by the student’s community placement site.

The cost of coverage under the University’s Professional Liability Plan is attached to tuition for the HP 480 course.
e. **Contact Hours/Credit Hours**

The Health Services Department requires students in a Health Services Specialty Track to complete a total of 6 credit/300-hour internship experience. Students majoring in Nutrition with a Wellness Minor are required to complete a 3 credit/150-hour internship experience.

Health Services students may opt for two 3-credit/150-hour experiences completed in two semesters (with two separate applications) at the same, or at different sites, or a single 6-credit/300-hour experience completed over one or two semesters at the same location or renew the experience at the same location for a second semester. (as long as the details are worked out with the agency site and preceptor). **Any second experience requires a second set of agreement, contact form and Health Contract.**

“Contact hours” (150-300) must be completed **on site** at the agency and/or under the supervision of a qualified Preceptor. Internship-related work performed at home (such as class assignments) does not count as “contact hours.”

Class time requirements are not counted as “contact hours.”

4. **Internship Site Selection**

a. **Identifying an Appropriate Internship Site**

You play an important role in identifying an appropriate site. You are encouraged to discuss preliminary ideas with your advisor and Career Services. Bring your ideas to your meeting with the Career Services Liaison, who will assist with aligning your interests with participating sites.

b. **Using Your Place of Employment as the Internship Site**

You may only use your current place of employment as your internship site if you can document that:

- The internship assignment is distinct from your employment responsibilities and will be completed in a department or division distinct from your regular position
- The hours devoted to the internship are distinct from your hours of employment
- There is a qualified Preceptor, other than your immediate supervisor, who can supervise your work

- The above criteria are reviewed by your employer and your supervisor is willing to submit a written statement that the criteria are acceptable and that each will be met. The feedback on using one’s place of employment as an internship site is mixed. Two of the major disadvantages reported are role confusion and job-related interruptions. The major advantage reported is convenience.

c. **Paid Internships**

Paid internships are rare, however, these opportunities are acceptable if the facility offers compensation for the experience.
5. **On-site Internship Interview**

a. **Purpose of the Interview**

You must have a face-to-face interview with your potential Preceptor. The Preceptor will assess your interests and whether you are a good fit for their organization. You must be able to articulate your interests during this interview.

b. **Preparation for the Interview**

Employers tell us that they are seeking interns who demonstrate professional behavior and appearance, a positive attitude toward learning, dependability, flexibility, initiative, quality work, and the ability to collaborate and work well in teams in a diverse environment. It is essential that you demonstrate these qualities during your interview. An interview does not guarantee that you will be accepted!

You should research the organization before the interview so you are familiar with their services, department and specialties. This will allow you to ask informed questions and help articulate why you are interested in working with them. Preceptors will ask you what you are interested in learning, please be prepared for this question!

c. **Information to obtain during your interview:**

- Will I have assigned project and related activities?
- Will I have opportunities to attend meetings/conferences within and outside of the program or agency?
- Will I receive supervision by my Preceptor on a regular basis?
- Will my Preceptor give me feedback on my performance during my internship?
- Will I have the resources required to complete my assignments (e.g. office space, phone, fax, photocopier, computer, etc.)?
- Will I be expected to work independently or as part of a team?
- Will I be working with other interns?
- What is the procedure for requesting a change in schedule or for reporting an absence?
- When I complete my assignments can I request additional projects?
- Will I report to an additional person other than my Preceptor?
- In the event that my Preceptor is unavailable, who will be authorized to assign activities to me?
- How will my schedule be arranged?

d. **Accepting an Offer**

Once you accept an internship offer, please notify (via email is acceptable) the Internship Program Instructor and the Career Services Liaison. Once an Internship Work Agreement form is signed, it is expected that you will honor your commitment.
6. **Internship Pre-placement Documentation**

The *Internship Work Agreement, Internship Site Contact Information form, and Health Services Requirements Contract* must be returned to the Health Services Department in Room HP2145. *(see Forms, Appendix II)*

- It is desirable to be onsite at least twice per week. This provides you with adequate exposure to the agency so that you can become acquainted with the organization personnel and to maximize your learning opportunities.

**a. Internship Work Agreement Form (see Forms, Appendix II)**

**Internship Site Contact Information Form**

**Health Services Requirements Contract**

The Purpose of these forms is to promote a clear understanding of the focus and substance of the internship. These forms protect all parties and can be referenced if questions arise relative to any aspect of the experience.

*These forms must all be signed by both the student intern and the site preceptor and returned to the Health Services Dept. in Room HP2145.*

**b. Castle Branch Corp. (the parent company of CertifiedBackground) Profile (Online)**

When pre-placement documentation is returned, you will be given the Castle Branch Corp. (the parent company of CertifiedBackground) Profile instructions. This information can also be found in Appendix I.

- The student is responsible for all expenses associated with completion of the Castle Branch Corp. (the parent company of CertifiedBackground) Profile.

- All documentation required for the Castle Branch Corp. (the parent company of CertifiedBackground) Profile must be completed prior to course registration and beginning of the internship.
  - For Fall Interns, no later than **August 1**
  - For Spring Interns, no later than **December 1**
  - For Summer Interns, no later than **May 1**

*Failure to meet this deadline may mean that your internship opportunity will be withdrawn by the Health Services Department.*

**c. Job Description / Goals**

The **Job Description** should be completed and uploaded to the Course Blackboard site. This form delineates the internship responsibilities and expected skill set.

- If the Internship includes a project, then it should be described briefly on the project/job description form.
Goals are learning points that the student and Preceptor create together. The student must have an idea of what they want to learn. Goals should be aligned with the student’s specialty and should be measurable. The Internship Learning Goals form should be completed and uploaded to the Course Blackboard site.

d. Internship Start & End Dates

Internships generally begin at the start of the term, but cannot be started until the requirements for the Castle Branch Corp. (the parent company of CertifiedBackground) Profile have been met. You may start your internship before or beyond the end of a semester if approved. These dates should be reflected on your Internship Work Agreement Form. Unforeseen circumstances may arise that may interfere with the timeline of the experience. It is imperative that communication be made with all parties involved to adjust the timeline if necessary. Tracking entries are required for these pre-semester hours if you want them counted toward the total hour requirement. Internships (which include your Certified Profile) not completed by the end of the term will receive an "Incomplete" grade until all requirements are met.

Note: POST YOUR SCHEDULE! Once your internship schedule is established, it is imperative that you provide the University with your planned schedule – there is an area on the Course Blackboard site for this information to be uploaded. In the event that your schedule changes over the course of the internship, you must UPDATE.

e. Registering for the Internship Course

Upon completion of all pre-registration requirements, The Health Services Department will clear the student to register online for the appropriate course (e.g., HP 480.NC1 or HP480.NO1) for the number of credits approved on your Agreement Form (3-6 credits).

f. Expectations to be Shared with Preceptor (see Appendix III)

Please share with your Preceptor, the documents found in Appendix III. They will be valuable in guiding both your preceptor and you to a successful internship experience.

7. Professional Conduct

a. Code of Conduct

Conducting yourself in a professional manner with the highest standards of personal ethics is an absolute requirement. Violations of professional conduct and/or generally accepted standards of ethical behavior will be grounds for termination from the internship with assignment of a not passing grade.

As an intern you will be expected to behave in a professional and ethical manner. Your conduct should be honorable, productive and represent the University in a manner such that hosts will want more USI students to follow.
The College of Nursing and Health Professions (CNHP) has adopted a **Social Media Policy**. It is expected that all interns abide by this policy. Failure to do so will mean an administrative withdrawal from the internship experience and subsequent course. (See the Social Media Policy as a part of your Certified Profile Information). You will read and sign the **Social Media Policy** as a part of the Castle Branch Corp. (the parent company of CertifiedBackground) Profile.

The following is expected of you as you participate in your internship and represent USI in the community.

- Assert yourself and your ideas in an appropriate and tactful manner
- Be fair, considerate, honest, trustworthy and cooperative when dealing with coworkers. DO NOT gossip.
- Communicate- keep people informed in a useful succinct way, listen and ask questions
- Do not conduct personal business during work hours (This is the use of any emails, cell phone, internet or appointments)
- Be observant- watch how people organize their thoughts, share them and how they respond to communications both positive and negative.
- Remain drug and alcohol free.
- Maintain confidentiality of work related projects and personnel.
- Familiarize yourself with and adhere to, relevant organizational arrangements, procedures and functions – this includes OSHA and HIPAA requirements.
- Understand what constitutes a permissible work absence and who to notify if absent, be prompt with being on time to work and with assignments. Always give your best effort!
- Changes in your work schedule, supervision or problems at your site must be reported to the internship coordinator.
- IF you feel victimized by a work related incident, contact the USI Internship program Instructor or Career Services Liaison.
- Dress appropriately for the work setting
- Follow through on commitments
- Be positive and look for opportunities to lend a hand or contribute.
- Keep an open mind. Practice developing Global Perspective by being an informed participant.
- Seek feedback from your supervisors, accept suggestions for corrective changes in behaviors and broaden your perspectives. Continuously strive to improve performance.
8. Required Internship Components

a. Internship Weekly Activity Tracking Form (see Appendix II)

The internship tracking form is a detailed account of your daily activities: a record of your internship dates, hours and significant learning exercises, noting gaps between what you are learning and what you expected to learn.

- Entries may briefly summarize your day’s events including points of interest or difficulties encountered
- Your entries may include a description of meetings attended, data compiled or materials read. It is the means by which you can track your own progress and provides necessary information for the integrative internship research paper.
- You and your Preceptor must sign and date weekly.
  - Forms will be submitted to the course Blackboard site.

b. Classroom Meetings & Midterm Review

Internship class meetings are conducted by the Internship Program Instructor and Career Services Liaison which are the on-campus, instructional component of the internship. These sessions provide an opportunity to exchange ideas and experiences, provide support, engage in problem solving, explore internship and work-related issues with other interns, and other professional development skills. Such exchanges also provide a chance to refine goals and objectives, and evaluate internship progress.

- **Attendance is mandatory** (please notify your Preceptor of upcoming scheduled meetings so you may be excused from your scheduled internship hours if needed - meeting time does not count towards your required contact hours). You will discuss strategies so you can get the most benefit from your internship experience.
- Class meetings scheduling will vary and be determined each semester.
- You are responsible for coordinating a time with your Preceptor and Career Services Liaison for a midterm review of your goals and progress 3 weeks before midterm, please call career services for possible dates for the midterm review. The meeting can be by phone or face-to-face and will last about an hour. You should plan several weeks before to schedule the meeting date. **This is a mandatory requirement for successful completion of the Internship.**

c. Professional Development

There is an adopted text for the classroom portion of this Course. Please see the syllabus for details.

Professional Development is offered as a part of the Classroom Experience and will include topics such as:

- CPR Training
- Dinner view experience
- Interview/presentation skills
- Resume updates
- Elevator speech
- Dress to achieve
d. **Project Materials**

You are expected to complete at least one project for the agency. The project will be decided in consultation with your Preceptor. Your Preceptor will familiarize you with the overall functions/activities of your site and help you to identify appropriate projects. A summary of the experience will be presented to the class at the end of the semester.

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e. **Reflection Report /Electronic Poster Symposium (see Appendix III)**

Please see the syllabus for details

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f. **Evaluation**

This evaluation will have several components that may include, but not limited to:

- Midterm review with student and preceptor
- Online preceptor final evaluation

---

g. **Receiving a Grade for the Internship**

A "pass" or "no pass" grade will be recorded upon completion of the internship hours and all requirements. See the Course Syllabus for further details.

---

9. **Unanticipated Situations Can Arise**

a. **Activities not specified on the Internship Agreement Form**

As it is impossible to anticipate every internship activity, you may be asked to perform a function that you did not anticipate, but that is within the general expected duties of any internship. Certain tasks are common practice for most internship placements including photocopying, answering telephones, data management, letter-writing, delivery of documents, and on occasion, stuffing envelopes. However, as important as these activities are to the operation and success of any agency or program, they should not constitute the substance of your internship.

If you feel that you are being asked to perform duties not in line with your goals, please feel free to contact either the Career Services Liaison or Program Instructor.

b. **Activities that compromise your personal or professional values or beliefs**

In the unlikely situation, that you are asked compromise your personal or professional values or beliefs, please contact either the Career Services Liaison or Program Instructor for further direction.

c. **Discrimination/Harassment**

You should not feel you are being harassed or discriminated against in any way. If such should occur, please contact either the Career Services Liaison or Program Instructor for further direction.
10. Glossary

**Affiliation Agreement:** A formal Affiliation Agreement established between USI and your internship site – is only required by some agencies. It describes issues related to liability, scope of responsibility among other issues. If required, this inter-institutional agreement must be in place prior to the internship start date.

**AUPHA:** The Association of University Programs in Health Administration, the accreditation and certification body for the Health Administration program. ([http://www.aupha.org](http://www.aupha.org)).

**Career Services:** The professional currently employed by USI’s Career Services Department and Internships who has been assigned the responsibility of managing the relationship between USI and the community healthcare site. This person also ensures that NACE guidelines are met.

**Health Services Students:** Students enrolled in USI’s 120 credit hour Bachelor’s Degree in Health Services program, Specialty Track option.

**HIPAA:** Health Information Portability and Accountability Act ([http://www.hhs.gov/ocr/privacy/](http://www.hhs.gov/ocr/privacy/)) This Act guarantees the privacy of a patient’s/client’s health information. HIPAA Training can be found on the Health Services website at [http://www.usi.edu/health/faculty-staff-resources/osha-and-hipaa-training](http://www.usi.edu/health/faculty-staff-resources/osha-and-hipaa-training)

**Internship:** The Educational experience of a Health Services student and a student with a Food and Nutrition major and Health Promotion and Worksite Wellness minor in a community setting where health services are provided. A total of six (6) credit hours must be earned to complete the Bachelor’s Degree in Health Services with a Specialty. This may be done in one internship or in two separate placements (using two separate application) of 150 hours (3 credits) each. Food and Nutrition majors with a Wellness Minor are required to complete HP 480 for a total of 3 credit hours equal to 150 hours of field experience.

**Internship Program Instructor:** A faculty member in the Department of Health Services/Health Administration, who serves as the instructor for the Internship in Health Services and who is responsible of supervising/teaching the internship experience (HP 480).

**Memorandum of Understanding (MOU):** The official agreement between the University and external Health Care Agencies and Facilities, generally referring to clinical settings such as hospitals. It is this legal agreement that will allow students to be a part of the agency/facility in a student intern capacity, and to ensure that appropriate liability insurance coverage is in place or any other requirements as established in the agreement.

**NACE:** The National Association of Colleges and Employers, organizations which connects employers and career services professionals to provide best practices, trends, research, professional development, and conferences ([http://www.nacweb.org/home.aspx](http://www.nacweb.org/home.aspx)).

**OSHA:** Occupational Safety and Health Administration ([https://www.osha.gov/](https://www.osha.gov/)) assures a safe workplace and that all workers are in compliance with standards that keep workers safe on the job. Training is found at [http://www.usi.edu/health/faculty-staff-resources/osha-and-hipaa-training](http://www.usi.edu/health/faculty-staff-resources/osha-and-hipaa-training)
Preceptor: An appropriately credentialed and experienced health practitioner, who is employed full-time by a health agency and who serves as your on-site Internship Preceptor and mentor. Ideally, your Preceptor should possess a (graduate degree) with specialized training and experience in his/her chosen field. Other individuals who possess extensive experience, but without advanced degrees may also be approved as a Preceptor. The Preceptor is responsible for supervising your projects, duties and performance, completion of your evaluation, notifying Internship Program Instructor if problems are encountered during the internship period.
APPENDIX I:

Castle Branch Corp. (the parent company of CertifiedBackground) Profile Instructions and

HIPAA Policy & Procedures
Welcome to CertifiedProfile!

When you place your initial order, you will be prompted to create your secure CertifiedProfile account. From within your CertifiedProfile, you will be able to:

✓ View your order results
✓ Manage the requirements specific to your program
✓ Complete tasks as directed to meet deadlines
✓ Upload & store important documents & records
✓ Place additional orders as needed

To place your order, go to www.certifiedprofile.com

In the "Place Order" field, enter one of the following package codes specific to your preference for a drug screen test completion:

UF02 – Background Check, Drug Test & Medical Document Manager - $130.75
(drug tests are from LabCorp – 1200 Professional Blvd. Evansville, IN – price for drug test is included in the $130)

OR

UF02imdt – Background Check, Medical Document Manager & Document Manager w/Drug Test Results - $90.75
(drug tests are from a lab other than LabCorp – i.e. personal doctor, USI Student Health Ctr., Internship Site)

during order placement you will be asked for personal identifying information needed for security or compliance purposes. Supplying accurate & comprehensive information is important to the speed in which your order is completed.

The email address you use when placing your order will become your username for your CertifiedProfile & will be the primary form of communication for alerts & messages. Payment methods include: MasterCard, Visa, debit card, electronic check, money order, & installment payment.

You can respond to any active alerts or To-Do List items now, or return later by logging into your CertifiedProfile. You will receive alerts if information is needed to process your order & as requirements approach their due dates. Access your CertifiedProfile anytime to view order status & completed results. Authorized users in the Health Services Program will have access to view your requirements & compliance status from a separate CertifiedBackground portal.

Your CertifiedProfile Service Desk is available to assist you via phone, chat & email
Monday – Friday 8am-8pm & Sunday 10am-6:30pm EST
888-914-7279 or cpservicedesk@certifiedprofile.com
Medical Document Manager Requirements

Measles, Mumps & Rubella (MMR)
- One of the following is required:
  - 2 vaccinations
  - Positive antibody titer for all 3 components (lab report or physician verification of results required)

Varicella (Chicken Pox)
- One of the following is required:
  - 2 vaccinations
  - Positive antibody titer (lab report or physician verification of results required)
  - Medically documented history of disease that has been verified by a physician/nurse practitioner & contains their signature

Hepatitis B
- One of the following are required:
  - 3 vaccinations AND a positive antibody titer (lab report or physician verification of results required)
  - Positive antibody titer (lab report or physician verification of results required)

TB Skin Test
- One of the following is required:
  - 2 step TB Skin Test (2 separate TB skin tests 1-3 weeks apart administered within the past 12 months)
  - Quantiferon Gold Blood Test (lab report or physician verification of results required)
  - T-Spt Blood test (lab report or physician verification of results required)
  - If positive results, provide a clear Chest X-Ray (lab report or physician verification of results required)

Tetanus, Diphtheria & Pertussis (Tdap) - Provide documentation of a Tdap booster within the past 10 years

CPR Certification
- One of the following is required:
  - American Heart Association Healthcare Provider course
  - American Red Cross CPR/AED for Professional Rescuers & Health Care Professionals

Submit the front & back of a signed American Heart Association CPR card OR an American Red Cross Certificate of completion. Letters from providers of AHA are accepted temporarily until a card arrives with a renewal date of 30 days.

Influenza
- One of the following is required:
  - Documentation of current season’s flu vaccination between August 1 – October 10.
  - Declaration of flu vaccine along with statement from Health Care provider

Physical Examination
- Download, print & complete the 2 page Immunization and Test Records form and upload to this requirement.

Medical History
- Download, print & complete the 2 page Report of Medical History form and upload to this requirement.

HIPAA Score - CNHP website [http://www.usi.edu/health/faculty-staff-resources/osa-and-hipaa-training](http://www.usi.edu/health/faculty-staff-resources/osa-and-hipaa-training)
- Take the HIPAA test and print your HIPAA score out & upload the document to this requirement.

OSHA Results - CNHP website [http://www.usi.edu/health/faculty-staff-resources/osa-and-hipaa-training](http://www.usi.edu/health/faculty-staff-resources/osa-and-hipaa-training)
- Take the OSHA test and print your OSHA score out & upload the document to this requirement.

Your Certified Profile Service Desk is available to assist you via phone, chat and email
Monday-Friday 8am-8pm & Sunday 10am-6:30pm EST
888-914-7279 or cpsericedesk@certifiedprofile.com
Medical Document Manager Requirements

Confidentiality Statement
- Upload proof of your signed Confidentiality Statement to fulfill this requirement.

Workforce Member Review of HIPAA Policies
- Upload your signed Workforce Member Review of HIPAA policies document to fulfill this requirement.

Social Media Policy Agreement
- Print out your Social Media Policy (available to download from this requirement). Read the policy, sign, date and upload the document to this requirement.

Document Manager Requirements

Drug Test Results
- Submit documentation of a drug screen (minimum of 7 panel) administered within past 3 months with lab report. If results are negative, you will be cleared for placement into your program. If results are positive, you must provide documentation from your physician validating you had a prescription(s) for the drugs in question, prior to being cleared for placement into your program. If your results are positive and you provide no documentation from your physician validating you had a prescription for the drug in question, this requirement will be rejected and you will need to contact your program administrator.

Your Certified Profile Service Desk is available to assist you via phone, chat and email
Monday-Friday 8am-8pm & Sunday 10am-6:30pm EST
888-914-7279 or cpservicedesk@certifiedprofile.com
To-Do Lists

Click the blue plus signs below to expand your requirements.

**Clinical Requirements UPLO: Spring 2015 Interns**
Due Date: 12/01/2014

CertifiedProfile Specialists are available to assist you with all aspects of your To Do Lists, including understanding your clinical requirements, guiding you through the upload process and providing clarification on required requirements. Our hours are Monday-Friday: 8am-4pm EST and on Sundays: 10am-6:30pm EST. Reach us by chat from within your CertifiedProfile, email: cspservice@certifiedprofile.com or by phone: 888-94-0423.

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Date Due</th>
<th>STATUS</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Measles, Mumps &amp; Rubella (MMR)</td>
<td>12/01/2014</td>
<td>Overdue</td>
</tr>
<tr>
<td>2. Varicella (Chicken Pox)</td>
<td>12/01/2014</td>
<td>Overdue</td>
</tr>
<tr>
<td>3. Hepatitis B</td>
<td>12/01/2014</td>
<td>Overdue</td>
</tr>
<tr>
<td>4. TB Skin Test</td>
<td>12/01/2014</td>
<td>Overdue</td>
</tr>
<tr>
<td>5. Tetanus, Diphtheria &amp; Perussia (Tdap)</td>
<td>12/01/2014</td>
<td>Overdue</td>
</tr>
<tr>
<td>6. Influenza</td>
<td>12/01/2014</td>
<td>Overdue</td>
</tr>
<tr>
<td>7. Physical Examination</td>
<td>12/01/2014</td>
<td>Overdue</td>
</tr>
<tr>
<td>8. Medical History</td>
<td>12/01/2014</td>
<td>Overdue</td>
</tr>
<tr>
<td>9. CPR Certificate</td>
<td>12/01/2014</td>
<td>Overdue</td>
</tr>
<tr>
<td>10. HIPAA Score</td>
<td>12/01/2014</td>
<td>Overdue</td>
</tr>
<tr>
<td>11. Confidentiality Statement</td>
<td>12/01/2014</td>
<td>Overdue</td>
</tr>
<tr>
<td>12. Workforce Member Review of HIPAA policies</td>
<td>12/01/2014</td>
<td>Overdue</td>
</tr>
<tr>
<td>13. CSPIA Results</td>
<td>12/01/2014</td>
<td>Overdue</td>
</tr>
<tr>
<td>14. Social Media Policy Agreement</td>
<td>12/01/2014</td>
<td>Incomplete</td>
</tr>
</tbody>
</table>

Revised 11/15
These Health Information Privacy Policies and Procedures implement the College of Nursing and Health Professions’ obligations to protect the privacy of individually identifiable health information that we create, receive, or maintain.

We implement these Health Information Privacy Policies and Procedures to protect the interests of our clients/patients and workforce; and to fulfill our legal obligations under the Health Insurance Portability and Accountability Act of 1996 (“HIPAA”), its implementing regulations at 45 CFR Parts 160 and 164 (65 Fed. Reg 82462 (Dec. 28, 2000)) (“Privacy Rules”), as amended (67 Fed. Reg. 53182 [Aug. 14, 2002]), and state law that provides greater protection or rights to individuals than the Privacy Rules.

As a member of our workforce or as our Business Associate, you are obligated to follow these Health Information Privacy Policies and Procedures faithfully. Failure to do so can result in disciplinary action, including termination of employment or dismissal from your educational program. In addition, federal penalties for privacy violations can result in fines up to $250,000 and prison sentences of up to 10 years. The workforce includes any individual whose work performance at the University Of Southern Indiana College Of Nursing and Health Professions, (College), is under the direct control of the College. The workforce defined as, but is not limited to, all clinical, administrative, and academic full-time, part-time, temporary, and contract employees, as well as volunteers, and students.

These Policies and Procedures address the basics of HIPAA and the Privacy Rules that apply to the College. They do not attempt to cover everything in the Privacy Rules.

The Policies and Procedures of the College utilize the terms “individual” to refer to prospective clients/patients, clients/patients of record, former clients/patients, those whose health information is retained by the College, or the authorized representatives of these identified individuals.

On a yearly basis very member of the College workforce must participate in online HIPAA education and testing which is accessed through the College website, [http://health.usi.edu/](http://health.usi.edu/). The HIPAA quiz must be completed with a score of 75% or higher. If a score of 75% or higher is not achieved the quiz must be repeated until a passing score is achieved.

If you have questions or doubts about any use or disclosure of individually identifiable health information or about your obligations under these Health Information Privacy Policies and Procedures, the Privacy Rules or other federal or state law, consult the College of Nursing and Health Professions Infection Control and HIPAA Committee at 812.464.1151 before you act.
1. General Rule: No Use or Disclosure
The College must not use or disclose protected health information (PHI), except as these Privacy Policies and Procedures permit or require.

2. Acknowledgement and Optional Consent
The College will make a good faith effort to obtain a written acknowledgement of receipt of our Notice of Privacy Practices from an individual before we use or disclose his or her protected health information (PHI) for treatment, to obtain payment for that treatment, or for our healthcare operations (TPO).

The College’s use or disclosure of PHI for payment activities and healthcare operations may be subject to a “need to know” basis.

Consent from an individual will be obtained before use or disclosure of PHI for TPO purposes – in addition to obtaining an Acknowledgement of receipt of our Notice of Privacy Practices.

   a) Obtaining Consent – Upon the individual’s enrollment in a College education program, employment in the College, or first visit as a client/patient (or next visit if already a client/patient), consent for use and disclosure of the individual’s PHI for treatment, payment, and healthcare operations will be requested.

   The consent form will be retained in the individual’s file.

   b) Exceptions – Consent does not need to be obtained in emergency treatment situations; when treatment is required by law; or when communications barriers prevent consent.

   c) Consent Revocation – An individual from whom consent is obtained may revoke it at any time by written notice. The revocation will be included in the individual’s file.

   d) Applicability – Consent for use or disclosure of PHI should not be confused with informed consent for client/patient treatment.

3. Oral Agreement
The College may use or disclose an individual’s PHI with the individual’s oral agreement.

The College may use professional judgment and our experience with common practice to make reasonable inferences of the individual’s best interest in allowing a person to act on behalf of the individual to pick up health records, dental/medical supplies, radiographs, or other similar forms of PHI.

4. Permitted Without Acknowledgement, Consent Authorization or Oral Agreement
The College may use or disclose an individual’s PHI in certain situations, without authorization or oral agreement.

   a) Verification of Identity the College will always verify the identity and authority of any individual’s personal representative, government or law enforcement official, or other person, unknown to us, who requests PHI before we will disclose the PHI to that person.

The College will obtain appropriate identification and evidence of authority. Examples of appropriate identification include photographic identification card, government identification card or badge, and appropriate document on government letterhead. The College will document the request for PHI and how we responded.

   b) Uses, Disclosures, or Access Permitted under this Section 4 – Except where specifically authorized by the individual or appropriate representative as required by law, protected individual information may only be used, disclosed, or accessed by:
1. The individual or the individual's personal representative
2. The College workforce members who require access to protected individual information as defined by their job role. Reasons for which protected individual information are generally needed include:
   a. delivery and continuity of the individual's treatment or care.
   b. educational or research purposes, or
   c. College business or operational purposes
3. Non-College health care providers who need such information for the individual's care.
4. Third-party payers or non-College health care providers for payment activities of such entities.
5. Business Associates from whom the College has received written assurance that protected individual information will be appropriately safeguarded.

- The College may use or disclose PHI in the following types of situations, provided procedures specified in the Privacy Rules are followed:
  1. For public health activities;
  2. To health oversight agencies;
  3. To coroners, medical examiners, and funeral directors;
  4. To employers regarding work-related illness or injury;
  5. To the military;
  6. To federal officials for lawful intelligence, counterintelligence, and national security activities;
  7. To correctional institutions regarding inmates;
  8. In response to subpoenas and other lawful judicial processes;
  9. To law enforcement officials;
  10. To report abuse, neglect, or domestic violence;
  11. As required by law;
  12. As part of research projects; and
  13. As authorized by state worker’s compensation laws.

5. Required Disclosures
The College will disclose protected health information (PHI) to an individual (or to the individual’s personal representative) to the extent that the individual has a right of access to the PHI; and to the U.S. Department of Health and Human Services (HHS) on request for complaint investigation or compliance review. The College will document each disclosure made to HHS.

6. Minimum Necessary
All College workforce members must access and use protected individual information on a "need to know" basis as defined by their job role. In addition, when using or disclosing an individual’s information the amount of information used or disclosed should be limited to the minimum amount necessary to accomplish the intended purpose. When requesting an individual’s information from other health care providers, staff should limit the request to the minimum amount necessary. Minimum necessary expectation does not generally apply to situations involving treatment or clinical evaluation.

7. Business Associates
The College will obtain satisfactory assurance in the form of a written contract that our Business Associates will appropriately safeguard and limit their use and disclosure of the protected health information (PHI) we disclose to them.

These Business Associate requirements are not applicable to our disclosures to a healthcare provider for treatment purposes. The Business Associate Contract Terms document contains the terms that federal law requires be included in each Business Associate Contract.
a) **Breach by Business Associate** – If the College learns that a Business Associate has materially breached or violated its Business Associate Contract with us, we will take prompt, reasonable steps to see that the breach or violation is corrected.

If the Business Associate does not promptly and effectively correct the breach or violation, we will terminate our contract with the Business Associate, or if contract termination is not feasible, report the Business Associate’s breach or violation to the U.S. Department of Health and Human Services (HHS).

8. **Notice of Privacy Practices**

The College will maintain a **Notice of Privacy Practices** as required by the Privacy Rules.

a) **Our Notice** – The College will use and disclose PHI only in conformance with the contents of our Notice of Privacy Practices. We will promptly revise a Notice of Privacy Practices whenever there is a material change to our uses or disclosures of PHI to legal duties, to an individual’s rights or to other privacy practices that render the statements in that Notice no longer accurate.

b) **Distribution of Our Notice** – The College will provide our Notice of Privacy Practices to each individual who submits health information to the College.

c) **Acknowledgement of Notice** – The College will make a good faith effort to document receipt of the Notice of Privacy Practices.

9. **Individual’s Rights**

The College workforce will honor the rights of individuals regarding their PHI.

a) **Access** – The College will permit individuals or workforce members access to their own PHI we or our Business Associates hold.

No PHI will be withheld from an individual unless we confirm that the information may be withheld according to the Privacy Rules. We may offer to provide a summary of the health information. The individual must agree in advance to receive a summary and to any fee we will charge for providing the summary.

b) **Amendment** – Individuals and workforce members have the right to request to amend their own PHI and other records for as long as the College maintains them.

The College may deny a request to amend PHI or records if: (a) we did not create the information (unless the individual provides us a reasonable basis to believe that the originator is not available to act on a request to amend); (b) we believe the information is accurate and complete; or (c) we do not have the information.

The College will follow all procedures required by the Privacy Rules for denial or approval of amendment requests. We will not, however, physically alter or delete existing notes. We will inform the individual or workforce member when we agree to make an amendment. We will contact any individuals whom the individual or workforce member requests we alert to any amendment to the PHI. We will also contact any individuals or entities of which we are aware that we have sent erroneous or incomplete information and who may have acted on the erroneous or incomplete information to the detriment of the individual or workforce member.

When we deny a request for an amendment, we will mark any future disclosures of the contested information in a way acknowledging the contest.

c) **Disclosure Accounting** – Clients/patients or workforce members have the right to an accounting of certain disclosures the College made of their PHI within the 6 years prior to their request. Each disclosure we make,
that is not for treatment payment or healthcare operations, must be documented showing the date of the disclosure, what was disclosed, the purpose of the disclosure, and the name and (if known) address of each person or entity to whom the disclosure was made. Documentation must be included in the client’s or workforce member’s record.

We are not required to account for disclosures we made: (a) before April 14, 2003; (b) to the individual (or the individual’s personal representative); (c) to or for notification of persons involved in an individual’s healthcare or payment for healthcare; (d) for treatment, payment, or healthcare operations; (e) for national security or intelligence purposes; (f) to correctional institutions or law enforcement officials regarding inmates; or (g) according to an Authorization signed by the patient or the patient’s representative; (h) incident to another permitted or required use disclosure.

The College will charge a reasonable, cost-based fee for every accounting that is requested more frequently than every 12 month, provided that the College has informed the individual in advance of the fee and provides the individual with an opportunity to modify or withdraw the request.

d) **Restriction on Use or Disclosure** – Individuals have the right to request the College to restrict use or disclosure of their PHI, including for treatment, payment, or healthcare operations. The College has no obligation to agree to the request, but if we do, we will comply with our agreement (except in an appropriate dental/medical emergency).

We may terminate an agreement restricting use or disclosure of PHI by a written notice of termination to the individual. We will document any such agreed to restrictions.

e) **Alternative Communications** – Individuals have the right to request the use of alternative means or alternative locations when communicating PHI to them. The College will accommodate an individual’s request for such alternative communications if the request is reasonable and in writing.

The College will inform the individual of our decision to accommodate or deny such a request.

**10. Staff Training and Management, Complaint Procedures, Data Safeguards, Administrative Practices**

a) **Staff Training and Management**

**Training** – The College will train all members of our workforce in these Privacy Policies & Procedures, as necessary and appropriate for them to carry out their functions. Workforce members will complete privacy training prior to having access to PHI and on a yearly basis thereafter.

The College will maintain documentation of workforce training.
### b.).Violation Levels and Disciplinary /Corrective Actions

Below are examples of privacy and security violations and the minimum disciplinary / corrective actions that will be taken. **Depending on the nature - Violations at any level may result in more severe action or termination.**

<table>
<thead>
<tr>
<th>Level of Violation</th>
<th>Examples</th>
<th>Minimum Disciplinary /Corrective Action</th>
</tr>
</thead>
</table>
| **Level 1 Carelessness** | • Failing to log-off/close or secure a computer with *protected health information* displayed.  
• Leaving a copy of *protected health information* (PHI) in a non-secure area.  
• Discussing *protected health information* (PHI) in a non-secure area (lobby, hallway, cafeteria, elevator) | **Staff:** Verbal warning with documentation by immediate supervisor  
**Students:** Verbal warning with documentation by clinical faculty and/or Program Director  
**Faculty:** Verbal warning with documentation by Program Director or Dean |
| **Level II Undermining Accountability** | • Sharing ID/password with another coworker or encouraging a coworker to share ID/password.  
• Repeated violation of previous level | **Staff:** Written performance counseling  
**Students:** Written performance counseling by clinical faculty and/or Program Director  
**Faculty:** Written performance counseling by Program Director or Dean |
| **Level III Unauthorized Access** | • Accessing or allowing access to *protected health information* (PHI) without having a legitimate reason.  
• Repeated violation of previous levels. | **Staff:** Final performance improvement counseling  
**Students:** Written performance counseling and Program Director determines disciplinary action  
**Faculty:** Written performance counseling and Program Director or Dean determines disciplinary action |
b) Complaints – The College will implement procedures for individuals to complain about compliance with our Privacy Policies and Procedures or the Privacy Rules. The College will also implement procedures to investigate and resolve such complaints.

The complaint form can be used by the individual to lodge the complaint. Each complaint received must be referred to the College Compliance Committee immediately for investigation and resolution. We will not retaliate against any individual or workforce member who files a complaint in good faith.

c) Data Safeguards – The College will strengthen these Privacy Policies and Procedures with such additional data security policies and procedures as are needed to have reasonable and appropriate administrative, technical, and physical safeguards in place to ensure the integrity and confidentiality of the PHI we maintain.

The College will take reasonable steps to limit incidental uses and disclosures of PHI made according to an otherwise permitted or required use or disclosure.

d) Documentation and Record Retention – The College will maintain in written or electronic form all documentation required by the Privacy Rules for six years from the date of creation or when the document was last in effect, whichever is greater.

e) Privacy Policies & Procedures – The College of Nursing and Health Professions Infection Control and HIPAA Committee will make any needed changes to the Privacy Policies and Procedures.

11. State Law Compliance

The College will comply with state privacy laws that provide greater protections or rights to individuals than the Privacy Rules.
12. HHS Enforcement

The College will give the U.S. Department of Health and Human Services (HHS) access to our facilities, books, records, accounts, and other information sources (including individually identifiable health information without individual authorization or notice) during normal business hours (or at other times without notice if HHS presents appropriate lawful administrative or judicial process).

We will cooperate with any compliance review or complaint investigation by HHS, while preserving the rights of the College.

13. Designated Personnel

The Chairperson of the College of Nursing and Health Professions Infection Control and HIPAA Committee will serve as Privacy Officer and contact person for the College.
APPENDIX II:

Career Services Forms/Health Services Contract
INTERN SITE PRECEPTOR CONTACT INFORMATION

Student Name__________________________________ Student ID#_____________________
Concentration___________________ Class for internship______________ Semester_______
Student email________________________________________________________________
Student phone ________________________________________________________________
Site Supervisor Name _________________________________________________________
Supervisor Title/Position _______________________________________________________
Supervisors phone __________________________________________________________________
Supervisors mailing address _____________________________________________________
Supervisors email __________________________________________________________________
Start date of this Internship ____________________________________________________
Number of site hours needed for this internship ____________________________________
Date of midterm visit __________________________________________________________________

This form must be returned to the Health Services Department – Room 2145 or email
this form to Kathy Weinzapfel

Email: kdweinzapf@usi.edu
Email: jlfiein@usi.edu
We, the undersigned, have read the following and agree:

- This contract and any other forms required by the Faculty Supervisor, Field Supervisor, or Internship Coordinator must be completed before the internship begins. Calculation of hours spent in the field begins after the proper contracts have been returned to the University. No credit will be given if this condition is not met, regardless of time spent in the field.

- The intern should honor the ethical standards and professional codes and practices of the field of the internship and of the university.

- The internship should provide varied learning experiences and activities; it should not exploit the intern.

- The intern’s work responsibilities and work schedule, including vacation time, shall be arranged by the intern and the internship field supervisor.

- The number of working hours per internship shall be a minimum of 150/300 (circle one) hours per semester.

- The student will maintain a log or portfolio documenting the internship. The faculty internship supervisor may require additional material which will be stated below.

- The student will complete all paperwork provided in the internship packet including a goals statement, two (2) evaluations, and a final paper.

- The legal agreement between the University and the organization shall be effective until formally rescinded by Career Services and the organization.

- The internship field supervisor will provide continual evaluative information to the intern regarding the intern’s work and will submit a minimum of two written evaluations to the University.

- The intern shall schedule periodic conferences with the faculty internship supervisor. The number and nature of these conferences shall be determined by the faculty internship supervisor. Failure to adhere to an agreed upon schedule of these conferences will result in the termination of the internship.

- The internship may also be terminated at any time that (1) one or more of the above conditions is violated; or (2) an agreement to terminate is decided mutually between below signed parties. If termination is due to negative actions of the intern, a failing grade may be assigned.

The following additional requirement(s) shall be met:

<table>
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<tr>
<th>INTERN</th>
<th>HOST SUPERVISOR &amp; Company Name</th>
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<tbody>
<tr>
<td>USI FACULTY SUPERVISOR</td>
<td>USI INTERNSHIP COORDINATOR</td>
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Semester ___________________________ Date ___________________________

This form must be returned to the Health Services Department – Room 2145 or email this form to Kathy Weinzapfel

Email: kweinzapf@usi.edu; Email: lfein@usi.edu
Please complete this contract with your Internship Preceptor and return it to the Health Services office in HP2145 or email a copy to the Internship Program Instructor or Career Services Liaison.

It is the policy of the Health Services Program and the College of Nursing and Health Professions that those students intending to complete HP 480 internships must meet minimum specific training and profile requirements prior to beginning an approved internship.

1. USI Health Services HP 480 Specific Training and Profile Requirements:

The following information provides a review of the specific training and profile requirements for students wishing to complete an internship in HP 480:

**Measles, Mumps & Rubella (MMR)**
- One of the following is required:
  - ✔ 2 vaccinations
  - ✔ Positive antibody titer for all 3 components (lab report or physician verification of results required)

**Varicella (Chicken Pox)**
- One of the following is required:
  - ✔ 2 vaccinations
  - ✔ Positive antibody titer (lab report or physician verification of results required)
  - Medically documented history of disease that has been verified by a physician/nurse practitioner & contains their signature

**Hepatitis B**
- One of the following are required:
  - ✔ 3 vaccinations AND a positive antibody titer (lab report or physician verification of results required)
  - ✔ Positive antibody titer (lab report or physician verification of results required)

**TB Skin Test**
- One of the following is required:
  - ✔ 2 step TB Skin Test (2 separate TB skin tests 1-3 weeks apart administered within the past 12 months)
  - Quantiferon Gold Blood Test (lab report or physician verification of results required)
  - T-Spot Blood test (lab report or physician verification of results required)
  - If positive results, provide a clear Chest X-Ray (lab report or physician verification of results required)

**Tetanus, Diphtheria & Pertussis (Tdap)**
- Provide documentation of a Tdap booster within the past 10 years

**CPR Certification**
- One of the following is required:
  - ✔ American Heart Association Healthcare Provider course
  - ✔ American Red Cross CPR/AED for Professional Rescuers & Health Care Professionals

Submit the front & back of a signed American Heart Association CPR card OR an American Red Cross Certificate of completion. Letters from providers of AHA are accepted temporarily until a card arrives with a renewal date of 30 days.

**Influenza**
- One of the following is required:
  - ✔ Documentation of current season’s flu vaccination between August 1 – October 10.
  - ✔ Declination of flu vaccine along with statement from Health Care provider

**Physical Examination**
- Download, print & complete the 2 page Immunization and Test Records form and upload to this requirement.

**Medical History**
- Download, print & complete the 2 page Report of Medical History form and upload to this requirement.

**HIPAA Score**
- CNHP website [http://www.usi.edu/health/faculty-staff-resources/osa-and-hipaa-training](http://www.usi.edu/health/faculty-staff-resources/osa-and-hipaa-training)
- Take the HIPAA test and print your HIPAA score out & upload the document to this requirement.

**OSHA Results**
- CNHP website [http://www.usi.edu/health/faculty-staff-resources/osa-and-hipaa-training](http://www.usi.edu/health/faculty-staff-resources/osa-and-hipaa-training)
- Take the OSHA test and print your OSHA score out & upload the document to this requirement.

**Confidentiality Statement**
- Upload proof of your signed Confidentiality Statement to fulfill this requirement.

**Workforce Member Review of HIPAA Policies**
- Upload your signed Workforce Member Review of HIPAA policies document to fulfill this requirement.

**Social Media Policy Agreement**
- Print out your Social Media Policy (available to download from this requirement). Read the policy, sign, date and upload the document to this requirement.

**Drug Test Results**
- Submit documentation of a drug screen (minimum of 7 panel) administered within past 3 months with lab report. If results are negative, you will be cleared for placement into your program. If results are positive, you must provide documentation from your physician validating you had a prescription(s) for the drugs in question, prior to being cleared for placement into your program. If your results are positive and you provide no documentation from your physician validating you had a prescription for the drug in question, this requirement will be rejected and you will need to contact your program administrator.
The student will incur the cost of these requirements unless otherwise covered by the facility. Please note if any of the above requirements will be completed on site:

**Additional Requirements:**

**Any Additional Comments:**

Student Signature __________________________________________ Date __________________

Supervisor/Preceptor Signature __________________________________ Date __________________

Work Site __________________________________________ Semester Internship ______________

*This form must be returned to the Health Services Department – Room 2145 or email this form to Kathy Weinzapfel*

Email: kdweinzapf@usi.edu
Email: jifein@usi.edu
INTERNSHIP LEARNING GOALS

Internships are most productive when students articulate and record their learning goals at the beginning of the work experience. First, determine what learning you hope to gain from the internship. Then, discuss with your supervisor to make sure the position will offer you the opportunity of achieving these goals. At mid-term, we will evaluate the progress of your goal achievements.

To be meaningful, goal statements must be:
- Specific
- Measurable
- Verifiable
- Achievable
- Agreed upon

List five goals below which you wish to achieve as a result of participating in this internship experience. *These learning goals should be discussed in your final paper.*

GOAL STATEMENTS:

1. ____________________________________________
   ________________________________________________________________________

2. ____________________________________________
   ________________________________________________________________________

3. ____________________________________________
   ________________________________________________________________________

4. ____________________________________________
   ________________________________________________________________________

5. ____________________________________________
   ________________________________________________________________________

Name__________________________________________  Today’s Date__________________
Host Signature __________________________________ Date _________________________
Work Site_______________________________________ Semester Internship___________
Post to Course Blackboard Site
JOB DESCRIPTION SAMPLE FOR INTERNSHIP

Title of Preceptor:
Title of Project:

Skills (needed for this project):

Additional Skills (desired for internship): MS Publisher, music, Excel

Brief Description of Company:

Description of Responsibilities (may include but not limited to):

Project description:

Post to Course Blackboard Site
Course #_______ Health Services Internship

Weekly Activity Tracking Form

Please use this form to track the days, hours and activities completed during your practicum. You are required to complete 150 hours for this practicum. This weekly summary should be submitted to your site supervisor weekly. The documents should be retained for your records.

<table>
<thead>
<tr>
<th>Date</th>
<th>Hours</th>
<th>Activities for the day:</th>
<th>What I learned from these activities:</th>
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Student Signature: ___________________________________________ Date: ________________

Site Supervisor Signature: ________________________________ Date: ________________

Post to Course Blackboard Site
APPENDIX III:

Expectations for Preceptor
Expectations for Preceptor

Internship Work Agreement Form
The student must submit the signed agreement form to the Health Services department before they can register for the HP480 course.

Contact Hours/Credit Hours
Students may opt for a 3-credit (150-hour) or a 6-credit (300 hour) Internship, as is arranged with you, as Preceptor.

Contact hours (150-300) must be completed on site at the agency, and/or under supervision of the Preceptor. Internship-related work performed at home does not count as “contact hours.” The student is to keep record of their time and activities on the tracking form. The Preceptor is encouraged to sign and date the form each week.

It is usually best when interns can be onsite at least twice per week. This provides them with substantial exposure to the agency so that they can become acquainted with agency personnel and to maximize their learning opportunities.

Preceptor Responsibilities/ Expectations

- Develop meaningful and challenging experiences relating to the intern’s academic and career goals as per Goals/Project Form.
- Provide the Intern with appropriate orientation to the organization, work environment, and organization policies and procedure including expected performance standards; office etiquette and attire; work hours; telephone manners; availability of supplies; confidentiality; and process for resolution of ethical dilemmas.
- Define the role of the intern and communicate this role to the intern and relevant staff.
- If possible, schedule activities that allow the intern to gain broad exposure to the professional field as well as to develop proficiency at more narrow tasks.
- Provide oversight of Intern’s projects, duties, and performance.
- Schedule regular supervisory meetings with the intern to enable the intern to ask questions, resolve problems, report on his/her progress, receive training and instructions, and receive advice related to his/her future career plans.
- At the end of the internship, an exit interview should be conducted with the intern to discuss the Preceptor Evaluation Form (link for evaluation form will be emailed at midterm and upon completion of interns contact hours).
- Notify the Internship Instructor or Career Services Liaison immediately of any problems or if you have questions or suggestions.
- If internship is conducted at place of employment, Preceptor will assure that internship activities will be different than Intern’s regular job duties/activities.
Expectations of Intern’s Professional Conduct
All interns must conduct themselves in a professional manner (dress, personal hygiene, and minimal use of personal electronic devices). During the winter months, The University of Southern Indiana may designate a snow day. Interns are expected to follow the agencies work calendar (national holidays) not the universities holidays. However, if travel conditions are unsafe they should notify you that they cannot be present.

Discrimination/ Harassment
Interns should be provided a copy of the agency’s policy on discrimination and harassment.

Termination from the Internship Program
Please contact the Internship Program Instructor or Career Services Liaison immediately in the event of violations of professional conduct and/or generally accepted standards of ethical behavior.
USI STUDENT INTERN PRECEPTOR GUIDE

The faculty and staff of the USI Health Services Department want to thank you for hosting one of our students. We believe the best way to learn is through experience and we appreciate you sharing your time and talent to make this possible.

We encourage our students to be the contact point and resource for most of your information from the university. This is their learning experience. However, at any point we encourage you to contact Kathy Weinzapfel, Career Coordinator, at 812-464-1865 in the USI Career Services Office with any questions or concerns.

We have three points we hope each intern has an opportunity to experience during this 150 or 300 hr. hour internship.
- We encourage our students to become involved in a project that requires most of their time. This is a project the two of you agree upon. It should allow the student to gain a deeper understanding of your agency and how it works.
- We believe your Staff is the best teachers to give a student insight into careers within your industry. We hope there is time for the intern to meet with various department personnel to learn their duties, career path and training.
- Students need a wide variety of experiences to help them develop their academic and professional skills.

For many of our students this is the first experience in their chosen academic field. They will depend on your guidance to introduce them to the functions and responsibilities of your company or department. However they should demonstrate the initiative to ask questions and offer assistance at any time. Your role is their coach to guide, encourage, redirect and praise whenever it is appropriate.

We sincerely appreciate your partnership in giving USI students an opportunity to experience actual working environment in their chosen field. We hope this will be as rewarding for you as we know it will be for the student.

Sincerely,

Kathy Weinzapfel
Career Services Coord.
College Nursing & Health Professions
Dept. Education, Social Work,
Kinesiology, Exercise Science
APPENDIX IV:

Internship Reflection Report Instructions
Internship Reflection Instructions

The purpose of this paper is for you to describe your internship experience, and discuss how your experience relates to larger issues and challenges facing the health care system. This paper should demonstrate the application of knowledge gained from your coursework to your internship activities and should be included in your professional portfolio!

I. Overview of the Agency/Organization
   a. Brief history and mission.
   b. Overview of services provided.
   c. Organizational Chart and identification of your internship placement within the organization.
   d. Company policies that affected your placement
   e. Required knowledge, skills, and attributes to be successful working in this setting

II. The Healthcare Environment
   a. What are the major issues facing the current health care environment?
   b. Discuss how these issues are impacting the organization/agency where you completed your internship.
   c. How is the organization/agency responding to these challenges?
   d. In what way was the focus of your internship related to these issues?

III. Description of internship activities including procedures and responsibilities
   a. Describe the major activities/projects that you completed or contributed to during your internship.
   b. What types of computer applications were utilized?
   c. Describe data compiled, materials reviewed, and work produced (where relevant).
   d. How did your activities/projects contribute to the organization’s mission?
   e. How did the organization benefit from your projects/output?

IV. Activities log summary
   Include a written, detailed account of daily/ongoing activities including number of hours and meetings attended.
   i. Identify points of interest and/or difficulties experienced
   j. Describe inconsistencies/consistencies between what you learned in specific classes and what you experienced during your internship.

V. Internship Assessment
   a. Employment and orientation process to the internship site – was this adequate? What was good/missing?
   b. Self-evaluation of internship.
   c. Supervisor relationships.
   d. Benefits gained through internship experience.

VI. Assessment of Preparation for Internship
   a. Which classes best prepared you for your internship and why?
   b. Identify coursework or activities you wish you had prior to your internship.
      c. Suggested changes that would have strengthened your internship experience.