

UNIVERSITY OF FLORIDA
INFORMATION PRIVACY POLICIES & PROCEDURES
HEALTH INFORMATION OPERATIONAL GUIDELINES

I. Volunteering and Observing Patient Care (“Shadowing”)

A. POLICY

Rev. 06/01/2009

1. Health-related areas at the University of Florida accept Volunteers and Observers in limited cases and with approved sponsors.

a) Scope:

(1) This policy includes, but is not limited to:

- (a) *Visiting and volunteer health care professionals,*
- (b) *All visiting students (including non-HSC UF students),*
- (c) *UF HSC student volunteers*
- (d) *Applicants for certain University of Florida positions,*
- (e) *Trade representatives not registered in Rep-Trax (Shands),*
- (f) *Visiting family members of UF employees,*
- (g) *Any other similar persons or groups.*

NOTE: Foreign visitors must provide appropriate visas and other documentation.

(2) This policy does **not** include:

- (a) *Observation/Shadowing by UF students who are enrolled in a UF Health Science Center College or Program,*
- (b) *Fellows, interns, residents, and students on formal clinical and/or contractual rotations,*
- (c) *Patient/clients, or family members or friends visiting or accompanying patient/clients.*

(3) Exception: Visiting faculty and applicants for faculty positions who visit for less than two days are not required to complete the HIPAA training modules, but are requested to review the UF Health Information Policy and sign the UF Confidentiality Statement prior to beginning activities with the University.

b) Minors: A parent or legal guardian of a minor (under 18 years) approved for observation must provide written permission for the approved activities.

- (1) NOTE: Observers under 18 years of age and not enrolled in a UF or UF-affiliated student program are prohibited from observing or shadowing in direct patient/client care areas where protection of the patient/client’s physical privacy is generally expected.

c) Sponsorship:

- (1) The University does not provide any sponsor-matching services for individuals wishing to shadow a health care professional or to volunteer. All arrangements for sponsorship must be made by the individual.
- (2) Faculty and staff who sponsor Volunteers and Observers assume full responsibility for their supervision and agree to ensure that they comply with all policies and procedures of the University of Florida

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(and Shands HealthCare, if applicable) and all applicable state and federal laws while engaged at the University.

- d) *Authorizations: If **Volunteers** or Observers will be in contact with patient/clients, either in person or remotely viewing patient/client care, an attending physician in the case must offer each patient/client or legal representative, an opportunity to agree to the visitor's presence.*
 - (1) Such opportunity may be offered, and the agreement or objection received, verbally and documented in the patient/client's health record.
 - (2) The patient/client may also sign an Authorization to Use or Disclose Protected Health Information. (See Forms on the Privacy website)
 - (3) If the patient/client has signed an informed consent for surgery or other procedure that includes consent for observers, then no further written or verbal authorizations are required.
- e) *Access to Restricted Information: If needed for the performance of the duties assigned to them, Volunteers only, not Observers, may have limited access to restricted information, including protected health information, with written approval from the UF Privacy Office.*
- f) *Training: Volunteers and Observers must complete appropriate HIPAA and Privacy Training and sign a Confidentiality Statement prior to beginning activities at UF. Volunteers and returning Observers must renew their HIPAA requirements annually.*

2. Volunteering:

- a) *Volunteers may only be registered for one year at a time, and must renew their registration annually, if applicable.*
- b) *Non-professional and non-licensed students and other individuals who want to volunteer in any UF patient/client care areas should apply through the Shands Healthcare Volunteer Office or the Student Health Care Center.*
- c) *National and foreign medical/healthcare students, research scholars, and clinical professionals who want to volunteer:*
 - (1) In the College of Medicine: Apply through the COM Administrative Services;
 - (2) In the colleges of Nursing, Public Health and Health Professions, Pharmacy, or Veterinary Medicine: Apply directly through the Human Resources offices in those colleges;
 - (3) In the College of Dentistry: Apply through the COD Admissions Office;
 - (4) In the Student Health Care Center: Apply through the administrative office.
- d) *Professional clinicians, therapists, and researchers who want to practice within their specialty as a volunteer must be appropriately licensed and credentialed.*

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3. Observing or “Shadowing”

- a) *Observers may only be scheduled for three (3) consecutive weeks (21 continuous days) at a time. An observer desiring to stay longer may either apply to be re-registered for one subsequent visit (maximum of 21 days) or apply to register as a Volunteer. Each case will be considered individually.*
- b) *All Observers must be accompanied and/or supervised by a UF Health Science Center representative at all times.*

B. DEFINITIONS

1. **“Shadowing” or Observing:** for the purposes of this policy and procedure, the extra-curricular viewing of patient/client care or health-related procedures that is outside the scope of a student’s required course work, or of a health care professional’s job duties.
2. **Visiting:** for the purposes of this policy and procedure, time temporarily spent, to gain insight, knowledge, and experience, in a location that is not within the visitor’s normal scope of access or opportunity. The visitor is a guest, and not officially associated with the location by employment, contract, or any other formal written agreement.
3. **Volunteering:** providing, of an individual’s own free will, limited services that are within the scope of the individual’s expertise, with no monetary or material compensation for the services performed.

C. PRIVACY REQUIREMENTS

1. **Limited Access:** Access to PHI in any format must be limited to those persons who have a valid business or healthcare need for the information, or otherwise have a right to know the information.
2. **Security:** All protected health information created, received, or maintained by the University must be secured from unauthorized access at all times, to protect the information from damage, loss, alteration, and tampering. (See also Security: Privacy Safeguards)

D. PROCEDURES

1. Volunteers:

- a) *Volunteer forms are available through Human Resources Services. Volunteers should make all arrangements with the assistance of the sponsoring department.*
- b) *Complete the University of Florida’s training requirements:*
 - (1) Complete one online tutorial using a “dummy” number and print a certificate:
 - (a) *HIPAA & Privacy – General Awareness, or*
 - (b) *HIPAA for Researchers: for volunteers involved in human research projects*

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- (2) Review the Health Information Policy and “sign” the UF Confidentiality Statement. (Registration in the electronic database is all that is required by the Privacy Office; actual signatures are not required.)

2. Observers:

- a) For individuals: Make arrangements to be sponsored by a UF Health Science Center representative, and then complete all of the following steps with the sponsor prior to beginning activities at the University.

- (1) Complete the University of Florida’s training requirements:

- (a) *Online tutorial: HIPAA for Visitors & Vendors (use UF ID# 8888-####); print a certificate*
- (b) *Review the Health Information Policy and “sign” the UF Confidentiality Statement. (Registration in the electronic database is all that is required by the Privacy Office; actual signatures are not required.)*

- (2) The Observer’s sponsor completes the following steps:

- (a) *Use the Request to Observe Patient Care form to register the Observer with the Dean of the college where the observation will occur and with the Privacy Office;*
- (b) *For observation within Shands Healthcare System facilities, obtain the signature of either the Shands Chief of Staff (Gainesville) or the Shands Vice President for Medical Affairs (Jacksonville).*
- (c) *Submit the completed Request to Observe Patient Care form and all attachments to the appropriate office as indicated at the bottom of the form.*

- b) For groups of observers participating in scheduled teaching sessions that include either in-person or remote viewing of operative procedures or other patient/client care activities:

- (1) The group’s University sponsor completes a single Request to Observe Patient Care form for the group, following the procedure above, and submits it along with a Group Observation Roster listing all the proposed attendees.

- (2) The attendees:

- (a) *Complete UF’s online training tutorial: HIPAA for Visitors & Vendors (using UF ID# 8888-####), and print a certificate;*
- (b) *Review the Health Information Policy and “sign” the UF Confidentiality Statement. (Registration in the electronic database is all that is required by the Privacy Office; actual signatures are not required.)*
- (c) *Sign the Group Observation Roster when they attend the session.*

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- (3) After the observation, the sponsor forwards the completed Group Observation Roster with signatures to the UF Privacy Office (Gainesville) or the Office of HIPAA Compliance (Jacksonville) after the teaching session.

E. REFERENCES:

1. **HIPAA:** 45 CFR §164.501 (Definitions), §164.514(d) (Minimum Necessary Rule), §164.530 (Administrative Requirements), (b) (Training) and (e) (Sanctions)
2. **Florida Administrative Code:** Disciplinary Action Rules 6C1-1.008, 6C1-3.046 and 7, 6C1-4.016, and 6C1-7.048
3. **UF Policies:** Acceptable Use Policy (Information Technology), Workplace Issues: Outside Employment Policy (Human Resources), Overview: Outside Activities, Financial Interests and Conflict of Interest (UF DDD Memorandum 02/07/01)

F. EXHIBITS

1. Request to Observe Patient Care ([PDF form](#)) ([Fillable form](#))
2. Group Observation Roster ([PDF form](#)) ([Fillable form](#))
3. Volunteer Request to Observe or to Access Restricted Information
([PDF form](#)) ([Fillable form](#))