

Providence Student Behavior Standards

Behavior

- All Providence clinical opportunities are a privilege. It is expected that students performing clinicals at a Providence facility will conduct him or herself in the behavior and decorum expected of a clinical professional.
- Students are expected to fully participate in learning activities and demonstrate active listening skills, eye contact, a positive attitude and positive non-verbal communications. Students are to eagerly engage in dialogue with staff and to be accepting and encouraging of other students as they learn.
- Any Providence employee may remove the student from the clinical environment if it is suspected that the student is under the influence of drugs or alcohol, the care provided by the student is assessed as unsafe for the patient, or if the student is unprepared for the clinical experience.

Respectful Treatment

- Providence facilities are places of business and faculty and students are expected to exhibit a professional demeanor and appearance at all times.
- Students and faculty will adhere to Providence facility dress code and policies and wear appropriate ID badge(s) any time they are at the facility for clinical related activities.
- All Providence staff, vendors, contract personnel, volunteers, school personnel, students, patients, their families and visitors shall be treated in a respectful, dignified manner at all times. Language, non-verbal behavior, gestures, attitudes and activities shall reflect this respect and dignity of the individual at all times.

Drugs and illegal substances

- Regardless of the legality of a drug, Providence is a drug free environment. Students & faculty are expected to abstain from the use of drugs while performing clinicals at any Providence facility.

Photography, Cell Phones/electronic devices & Social Media

- Cell phones are not allowed in any clinical procedural area (OR, endoscopy, catheter lab etcetera). Please leave them at home, in your car, or in a locker in the scrub change area.
- Students may bring cell phones to non-procedural clinical areas, but they should only be used for emergency communication (e.g. sick child) and clinical purposes (e.g. looking up a treatment/medication or communicating with clinical instructor). Students should limit non-clinical related phone use (text messages, checking for voice messages, e-mail etcetera) to breaks.
- **Photography of patient, body part, staff, or clinical environment is absolutely prohibited and grounds for removal** from clinicals at any Providence facility indefinitely and may result in legal action by the patient or Providence.
- The student may not share any information about patients, staff, clinical environment or learning experience via any social media venue. Doing so is grounds for removal from clinicals at Providence indefinitely and may result in legal action by the patient or Providence.
- Students may not use electronic devices (Including cell phones, laptops, music or video devices, or other computer devices) to do homework or otherwise veer from the learning experience unless on a break or the device is used to enhance the clinical activity.

Providence Non-Employee Confidentiality, Privacy, Behavioral Standards and Nondisclosure Attestation

- I understand that in the course of performing services on behalf of Providence Health System - Oregon (PHS-OR), I will have access to information not generally available or known to the public. I agree that such information is confidential information that belongs to PHS-OR. Confidential information includes but is not limited to patient, customer, member, provider, group, physician, employee, financial, and proprietary information, whether oral or recorded in any form or medium. I agree that information developed by me, alone or with others, may also be considered confidential information belonging to PHS- OR.
- I will hold confidential information in strict confidence and will not disclose or use it except (1) as authorized by PHS-OR; (2) as permitted under written Agreement between PHS-OR and my employer or myself; (3) consistent with the scope of services I perform on behalf of PHS-OR and with applicable PHS- OR policies and practices; and (3) solely for the benefit of PHS-OR, its patients, members and other customers.
- I understand that this Confidentiality and Nondisclosure Statement does not limit my right to use my own general knowledge and experience, whether or not gained while contracting with PHS-OR, or my right to use information this is or becomes generally known to the public through no fault of my own.
- I will not access Confidential Information for which I have no legitimate need to know.
- I understand my responsibility to become familiar with and abide by applicable PHS-OR policies and protocols regarding the confidentiality and security of confidential information.
- I understand that PHS-OR electronic communication technologies are intended for benefit of PHS-OR, however limited personal use is permitted. Personal use is defined as incidental and occasional use of electronic communications technologies for personal activities that should normally be conducted during personal time and is not in conflict with PHS-OR business requirements. Internet usage is monitored and audited on a regular basis by PHS-OR management. PHS-OR management also reserves the right to monitor e-mail and telephone usage.
- I understand that if I breach the terms of this confidentiality and nondisclosure statement or applicable PHS-OR confidentiality, privacy and/or security policies, PHS-OR may terminate my association with PHS-OR, including any written Agreements with PHS-OR. Further, PHS-OR will be entitled to all remedies it may have under written Agreement or at law, as well as to seek and obtain injunctive and other equitable relief.
- I have reviewed, understand, and agree to comply with the student behavior standards.

Name: _____ Signature: _____
(Last, First, MI – Please Print)

School: _____ Date: _____