



University of Mississippi Medical Center Policy for Volunteer Student Activities in Research

Guide for Faculty and Volunteer Students

The purpose of this policy is to assist UMC faculty in the orientation, training and documentation of volunteer students in UMC research laboratories.

This policy has been prepared by Dr. Rob Rockhold in the Office for Student Outreach which is located in Room U155 and can be reached at (601) 814-4233 or rockhold@pharmacology.umsmed.edu

The policy contains:

- \$ Overview of Policies and Procedures for Volunteer Students in UMC Research Laboratories
- \$ Faculty Mentor Checklist
- \$ Volunteer Student Orientation Packet for Research Activities
- \$ Volunteer Student Contract
- \$ Information Policy Agreement
- \$ Form for Library Checkout Privileges for Volunteer Students
- \$ Volunteer Student Research Goals and Job Description
- \$ Volunteer Student Work Hour Log.

This policy will assist UMC to properly maintain and document a safe and effective education program for all volunteer students who seek experience in the research environment at UMC. It applies to all volunteer students who are neither UMC employees or UMC registered students.

This policy takes effect June 1, 2005.

**VOLUNTEER STUDENT ACTIVITIES
IN RESEARCH
AT
THE UNIVERSITY OF MISSISSIPPI MEDICAL CENTER**

Guide for Faculty and Volunteer Students

**Office for Student Outreach
U155
601-815-4233**

**Rob Rockhold, Ph.D.
Assistant Vice Chancellor for Student Outreach
rockhold@pharmacology.umsmed.edu**

Table of Contents

Policies and Procedures for Volunteer Students in UMC Research Laboratories	3
Overview	3
Identification and Registration of Volunteer Students	3
Photographic Identification Badges	4
Fingerprinting	4
Categories of Student Volunteers	4
Special Issues Regarding Secondary School Students	5
Information Packet for Faculty Mentors and Volunteer Students	5
Faculty Checklist	6
Volunteer Student Orientation Packet for Research Activities	7
Purpose	7
Policy	7
Procedure	7
Forms	
Volunteer Student Contract	9
Information Policy Agreement	11
Rowland Medical Library Circulation Privileges Memo	12
Volunteer Student Research Goals and Job Description	13
Volunteer Student Work Hour Log	14

Policies and Procedures for Volunteer Students in UMC Research Laboratories

I. Overview

The University of Mississippi Medical Center (UMC; the Medical Center) recognizes education and research as intertwined and primary aspects for the mission of the Medical Center. In addition to formal programs of education to UMC-registered students, the Medical Center offers opportunities for informal education in a research environment to individuals from the community who choose to volunteer their services. To properly maintain an atmosphere for safe and effective informal education, all individuals (volunteer students) who seek experience in the research environment at UMC, and who are neither UMC employees nor UMC-registered students, must be registered through the Office for Student Outreach.

The registration process will include, but not be limited to:

- issuance of a photographic identification badge and,
- completion of a written document certifying adherence to all applicable UMC policies and procedures, including specific safety training.

The following fundamental understandings govern the interactions between UMC faculty mentors and volunteer students.

- Every volunteer student will work with, and under the supervision of, a UMC faculty mentor who will be responsible for adherence of that student to these policies and procedures. This would include state and federal mandated issues including radiation safety, biohazards, HIPAA, IRB (human subjects), IACUC (animal research) and any other additional training as needed.
- The student and, when appropriate a parent or guardian, acknowledges that the Medical Center is providing this opportunity and pledges to abide by all policies for registration, training, and conduct while on the UMC campus.
- The Medical Center reserves the right to request the withdrawal of a student from the program if the student's behavior is disruptive or detrimental to the Medical Center.
- The volunteer student or parent/guardian assures that the student has adequate health insurance. All medical or health care (emergency or otherwise) that a student receives at the Medical Center will be at the expense of the student involved.
- The volunteer student or parent/guardian agrees to follow all relevant Medical Center policies and procedures and will keep in confidence all medical and health information pertaining to particular patients at the Medical Center.
- The volunteer student or parent/guardian agrees that the student is participating in this program as an educational experience. No compensation will be received from the Medical Center and the student will not be considered an employee of the Medical Center.
- The parties agree that participation in this program is no guarantee of an offer of admission to the School of Medicine, Nursing, Dentistry, Allied Health or Graduate programs. If a volunteer student should choose to apply for formal admission as a student to a Medical Center school program, that student would be reviewed under the normal admissions process for that school or program.

The Office for Student Outreach is also available to assist with coordination, evaluation and follow-up of non-UMC-registered students who have been employed on a temporary basis in a research capacity. Program coordinators of externally funded educational/research programs should contact the Office for Student Outreach to ensure that appropriate Medical Center training requirements have been met for the students participating in their programs.

II. Identification and Registration of Volunteer Students

Faculty supervisors/mentors accept the responsibility to notify the Office for Student Outreach, in a timely manner, of any volunteer students that they plan to host on the UMC campus. One function of the Office for Student Outreach is to develop and maintain a database for participants in Medical Center outreach efforts. To coordinate this effort, a packet of material intended to facilitate registration of volunteer students will be available through the Office. Faculty supervisors/mentors or the volunteer student can obtain the packet in the Office for Student Outreach in room U155 on the second floor of the Vernor S. Holmes Learning Resources Building, or by calling Ms. Pam Peeples (815-4233; ppeeples@acadaff.umsmmed.edu).

The two principal functions of the registration are to ensure that all volunteer students receive a UMC photographic identification badge and that all such individuals have received risk management and compliance training necessary for and consistent with UMC policy. A procedure for each student to receive risk management and compliance training will be communicated at the time of registration of the volunteer student. Unless otherwise instructed, each student should plan to attend the regularly scheduled Hospital Orientation sessions provided every Tuesday morning from 8 a.m. till 12 noon in Room 6A of the North wing of the hospital. This session should be completed prior to commencement of research activities by that student.

III. Photographic Identification Badges

Photographic identification badges are obtained through the Benefits Office of the UMC Department of Human Resources. The faculty mentor/supervisor should contact the Office for Student Outreach and provide the following information for each volunteer student:

- name,
- social security number,
- college/university of that student,
- beginning and termination dates for that student's rotation.

A time will be communicated for that individual to report for the photographic session. Students will be issued a UMC photographic identification card at no cost. This card will identify the individual as a **Volunteer Student** and shall carry a **green student color stripe**. Replacement cards are available for a fee if an original is lost or damaged.

IV. Fingerprinting

At this time, all volunteer students must adhere to the UMC fingerprinting policy. Fingerprints may be given at the station immediately outside the UMC Office of Student and Employee Health. The cost for this is normally \$50.00. However, this fee is waived for volunteer students.

V. Categories of Student Volunteers

The intent of this guide is to provide guidance for faculty mentors who have invited individuals, who are neither students registered with the UMC Registrar and in a regularly-enrolled course of study at UMC nor UMC employees, to share in their research endeavors. This may include minors, such as secondary school students (including home-schooled students), undergraduate students, students visiting from other graduate or professional training programs, visiting faculty from other institutions, and any others whom a faculty member may choose to invite into a research environment at UMC.

Those who seek to provide volunteer service in UMC hospitals and clinics, rather than research activities, should contact the Division of Volunteer Services. This may include students registered in health care professional schools, other than UMC, who participate in programs within a clinical setting. Because of liability issues, such students must participate **ONLY AS OBSERVERS, NO PATIENT CONTACT IS PERMISSABLE**. Policies for such students regarding tuberculosis testing and other blood-borne pathogens shall be determined by the Director of the Office of Student and Employee Health.

VI. Special Issues Regarding Secondary School Students

Volunteer students who participate while attending secondary school are usually below the age of consent (minors) and all documents will need to be signed by a parent/legal guardian. The faculty mentor should be aware that additional assurances may need to be obtained if the work in which a volunteer student participates will be presented in a science fair setting. Specific attention must be paid to use of complex invertebrate and vertebrate animals, including use of cells and cell cultures and tissues.

VII. Informational Packet for Faculty Mentors and Volunteer Students

The following pages present the forms that are available for registration of volunteer students. Due to the variety of volunteer students, not all forms are needed for all students.

The Faculty Checklist (p. 5) should be completed by the faculty mentor for ALL volunteer students and returned to the Office for Student Outreach prior to commencement of volunteer student activities.

Faculty Mentor Checklist

For research involving biohazards, blood-borne pathogens, radioactive substances, humans, higher invertebrate and vertebrate animals.

Faculty Mentor's Name: _____

Volunteer Student's Name: _____

Anticipated Start date for volunteer student activities: _____

Anticipated Completion date for volunteer student activities: _____

- | | YES | NO |
|--|--------------------------|--------------------------|
| 1). Is the volunteer student a minor (<18 years of age)? | <input type="checkbox"/> | <input type="checkbox"/> |
| 2). Has volunteer student been screened by Employee and Student Health? | <input type="checkbox"/> | <input type="checkbox"/> |
| 3). Has volunteer student attended a Hospital Orientation Session? | <input type="checkbox"/> | <input type="checkbox"/> |
| ----- | | |
| 4). Will recombinant DNA, pathogenic or potentially pathogenic agents be used? ... | <input type="checkbox"/> | <input type="checkbox"/> |
| 5). Will blood-borne pathogens be used? | <input type="checkbox"/> | <input type="checkbox"/> |
| 6). Will radioisotopes be used? | <input type="checkbox"/> | <input type="checkbox"/> |
| 7). Will human subjects be used? | <input type="checkbox"/> | <input type="checkbox"/> |
| 8). Will higher invertebrates or vertebrates be used? | <input type="checkbox"/> | <input type="checkbox"/> |

If the answer to any of the questions #4 - 8 is "Yes", please ensure that the appropriate UMC office and registration procedures are complete before the student volunteer begins activities.

Please return this form to the Office for Student Outreach.

Thank you for your assistance.

Volunteer Student Orientation Packet for Research Activities

I. Purpose:

All individuals (volunteer students) who seek experience in the research environment at the University of Mississippi Medical Center (UMC), and who are neither UMC employees nor UMC-registered students, must be registered through the Office for Student Outreach. The registration process will include but not be limited to issuance of a photo I.D. and completion of a written document certifying adherence to the policies and procedures listed below. Volunteer students work with, and under the supervision of, a UMC faculty mentor. The volunteer students may be active in a research environment that can include contact with patients, experimental organisms and/or with body fluids and tissues from such. Contact with substances that are commonly employed in the biomedical research endeavor, such as radioisotopes, chemicals, and biological hazards is to be anticipated. To ensure the safety of everyone involved, it is essential that all volunteers are made aware of, and agree to abide by, the risk management measures and policies of UMC.

II. Policy:

All volunteer students will be screened by Employee and Student Health personnel and will attend an orientation session to receive education in applicable areas, including but not necessarily limited to:

- A. Risk Management/Safety, including radioisotopes
- B. Blood-borne Pathogens
- C. Infection Control (if applicable)
- D. Student Outreach, including Research Ethics

Training in the first three of these areas is conducted on a regular basis in the Hospital Orientation sessions that are provided every Tuesday morning, from 8 a.m. till 12 noon in Room 6A of the North wing of the hospital. Volunteer students are asked to notify Risk Management personnel of their status as volunteer students. They will be given a specific sign-in sheet and their participation will be recorded. Training by the Office for Student Outreach will be conducted as needed.

III. Procedure:

- A. Role of Employee and Student Health
 - 1. All new volunteers will have the following before beginning service:
 - a. Performance of health screening.
 - b. PPD (at no cost to the volunteer).
 - c. Offer flu vaccine during influenza season (at no cost to the volunteer).
 - d. Past history of Hepatitis B infection or Hepatitis B vaccine.
 - e. Past history of Varicella infection or Varicella vaccine.
 - 2. Volunteers who have worked more than 100 hours:
 - a. Offer at no cost, Hepatitis B vaccine (if negative history and not previously vaccinated).
 - b. Offer at no cost, Varicella vaccine (if negative history and not previously vaccinated).
 - c. Offer at no cost testing for Rubella. If negative will need Rubella vaccine (in the form of MMR vaccine from local physician).

3. Volunteers under age of 18 years:
 - a. Proof of immunization, appropriate for age.
 - b. Advise to receive Varicella vaccine, if past history is negative and not vaccinated.
 - c. Proof of at least one dose of Measles, Mumps and Rubella vaccine.
 - d. Advise to receive Hepatitis B vaccine.
 - e. Parent or legal guardian to review and sign an explanation of the volunteer policy.
 - f. Once a volunteer under the age of 18 has provided more that 100 hours of service, will then be classified as #2 (see above, volunteers who have worked more that 100 hours).
 4. If deemed necessary, Employee and Student Health may require further medical evaluation.
- B. Role of Risk Management/Safety.
1. Will educate volunteers on the following information:
 - a. General Safety
 - b. Fire Safety
 - c. Radiological Safety
 - d. Hazardous materials
 - e. Blood-borne Pathogens
 1. Modes of transmission
 2. Appropriate engineering controls
 3. Safe work practices
 4. Personal protective equipment
 5. Reporting and medical follow-up of an exposure or injury.
 - a. Inform the appropriate supervisor.
 - b. Report to Employee Health, Monday - Friday 7:30am - 4:00pm, after hours go to the Adult Emergency Department.
- C. Role of Infection Control (as needed)
- Will educate volunteers on the following information:
- a. Handwashing
 - b. Isolation categories
 - c. Personal Protective Equipment (PPE)
 - d. Volunteers should be at least 21 years old to enter isolation rooms.
 - e. Volunteers will be additionally trained by Pediatric Infection Practitioner, on an as needed basis, before being allowed to enter isolation rooms in Children's Hospital.
- D. Role of Office for Student Outreach
- Will educate volunteers on the following information, if necessary:
- a. Patient confidentiality information and forms
 - b. General volunteer information
 - c. Research ethics
 - d. Waiver forms
- E. Faculty supervisor/mentor for volunteers, will be responsible for educating and supervising volunteers in their laboratories on policies and procedures specific to that area and the research being conducted.

VOLUNTEER STUDENT CONTRACT

The volunteer student program is an important component of the education and research efforts of the University of Mississippi Medical Center, (referred to as UMC).

I, _____, or if applicable
(Volunteer)

_____ have attended the
(Parent or Guardian)

an orientation session for volunteer students which included but may not have been limited to the following topics:

1. Risk Management/Safety, including radioisotopes
2. Blood-borne Pathogens
3. Infection Control (if applicable)
4. Student Outreach, including Research Ethics

For any materials that I do not understand, I have the opportunity to ask questions. If in the future I have any questions concerning the orientation session, I will contact the Assistant Vice Chancellor for Student Outreach, who can either answer the question or direct me to the appropriate personnel. As a volunteer, if there are any situations in which I do not wish to participate, I can refuse the assignment by relaying this information to the research supervisor/mentor, or the Assistant Vice Chancellor for Student Outreach.

UMC will take all reasonable precautions to ensure safety and well being of volunteer students, however volunteers in a university medical center research setting may be exposed to potential health hazards and may unknowingly be exposed to sick patients. These include, but are not limited to infectious diseases, such as TB, Flu, Measles, German Measles, (Rubella), Chicken Pox, Hepatitis virus, AIDS virus, and Cytomegalovirus.

All volunteers will be required to allow UMC to provide free of charge a tuberculosis skin test. (in the event that the volunteer had a positive skin test in the past, then the volunteer agrees to allow UMC to obtain free of charge a chest x-ray).

Volunteers will be offered the influenza vaccine at no charge during the influenza season (October-March).

Chicken Pox is a common infection in children. In adolescents, adults and sick patients, Chicken Pox can be severe and serious. Therefore, all volunteers will be asked about a past history of Chicken Pox. It is strongly recommended that volunteers who have not had Chicken Pox in the past contact their healthcare provider for the Varicella vaccine. Volunteers under age 18 can receive the Varicella vaccine at the health department, free of charge, (administration fee of \$10.00). Volunteers who have worked more than more than 100 hours at UMC and who have not had Chicken Pox or have not received the vaccine can receive the vaccine free of charge at UMC.

For volunteers less than 18 years of age, a copy of their immunization record will be required. A condition of volunteering in this age group is receipt of at least one dose of Measles, Mumps, and Rubella vaccine (MMR vaccine). For volunteers over the age of 18 who do not have proof of immunization, it is suggested (but not required) that they obtain German Measles (Rubella) antibody testing from their healthcare provider, (for women it can be obtained from their OB/GYN physician). For volunteers who are over the

age of 18 and have worked more than 100 hours, UMC will provide free antibody testing for rubella (German Measles).

With the above understanding, I do hereby waive any cause of action I may have against UMC resulting as my activities as a volunteer.

Signature of Volunteer

Date

If volunteer is a minor, signature of parent or guardian

Date

Witness

Date

**UNIVERSITY OF MISSISSIPPI MEDICAL CENTER
Information Policy Agreement**

As an individual having access to University of Mississippi Medical Center (UMC) information on or off campus, I agree to read and to abide by the UMC Information Policy and all other institutional policies. I understand that non-compliance will be cause for disciplinary action up to and including system privilege revocation, dismissal from UMC, and possible criminal and/or civil penalties.

Printed Name

Department or Affiliation

Employee #, Student ID #, or other ID

Signature

Date

A copy of the current UMC Information Policy is available on the internet at
http://dis.umc.edu/docs_forms/InformationSecurityPolicy.pdf

TO: Circulation Department
Rowland Medical Library

FROM:

DATE:

SUBJECT: Library Checkout Privileges for Volunteer Students

This is to certify that the faculty supervisor/mentor _____ in the UMC Department of _____ requests circulation privileges and assumes responsibility for any loss or damage to Rowland Medical Library materials incurred by _____ a volunteer student through the Office for Student Outreach. The student is a volunteer for the period of _____ through _____.

It is further agreed that the faculty supervisor/mentor assumes responsibility for assuring that the volunteer student is properly cleared by the library prior to leaving the program.

Checkout will be in the name of the individual signing this form.

Signature of responsible faculty member

Date

4/5/2005

Volunteer Student Research Goals and Job Description

Faculty supervisor/mentor and student should jointly determine the goals for, and specific description of responsibilities expected of, the volunteer student. Both parties should retain a copy and a copy should be made available upon request to the Office for Student Outreach.

I have read the contract and agree to fulfill the duties and responsibilities outlined above and to abide by all University of Mississippi Medical Center rules and regulations.

Volunteer Student's Signature

Date

I have discussed the volunteer activities with this student and have negotiated and assigned the work components listed above. I agree to act as the faculty supervisor/mentor for this individual.

Faculty Supervisor's/Mentor's Signature

Date

