



GVSU Health Compliance Policy

I. PURPOSE

Students, faculty, staff, and volunteers (Associates) at Grand Valley State University (GVSU) may participate in clinical or non-clinical experiential education or research (placements) at health-related affiliated organizations. To be protective of everyone involved, Associates and the community served, certain participation guidelines have been established.

During placements, Associates may interact with or be exposed to clients who are immunocompromised, or with diseases such as, but not limited to, tuberculosis (TB), hepatitis B, influenza, and other infectious conditions.

University policy, state and federal statutory regulations, and accreditation standards for academic programs and affiliated organizations require that our Associates comply with certain health, safety, and legal requirements. As such, GVSU is contractually mandated to ensure all Associates attain and maintain full compliance as defined in its affiliation agreements.

II. AFFILIATION AGREEMENTS

Affiliation Agreements, established for the purpose of placements, are a contractual relationship between GVSU and affiliated organizations to specify responsibilities and liabilities of each party.

The Health Compliance Office is responsible for executing, obtaining authorized signatures, and maintaining Affiliation Agreements for GVSU's health-related academic programs and for its other academic programs that utilize health-related affiliated organizations for placements. GVSU authorized signatories include program deans, their signatory designees, and those individuals possessing signature authority at affiliated organizations.

An Affiliation Agreement must be established prior to all placements. Student placements within GVSU do not require an Affiliation Agreement. Requests for new Affiliation Agreements for approved student placements must be sent via email to the Health Compliance Contract Administrator as soon as possible, but no less than twelve (12) weeks prior to planned placements. The Health Compliance Contract Administrator cannot guarantee the length of time it will require to fully execute an Affiliation Agreement with a particular site. Associates may not begin their planned placement until after the Affiliation Agreement is fully executed. GVSU faculty or academic program representatives who coordinate placements (Program Coordinators) are responsible for educating students regarding this Affiliation Agreement policy and the associated timeframes regarding Affiliation Agreement requests.

Program Coordinators must submit a request for an Affiliation Agreement by email to the Health Compliance Contract Administrator, by providing the following information:

- Affiliated facility's full name and address
- Affiliated facility's representative name, title, phone number, and email address
- Student's planned placement start date
- Affiliated facility's authorized signatory name and title, if known

Program Coordinators are responsible to undertake due diligence related to the facility and potential preceptor(s) to determine if they meet program licensure and accreditation requirements needed for course credit prior to requesting an Affiliation Agreement. The facility must be a registered business entity with their state and meet GVSU's liability insurance requirements.

Affiliation Agreements with evergreen language i.e., do not have an expiration date, will be reviewed after five (5) years. Placement data will be reviewed, and programs may be contacted, to determine if the Affiliation Agreement is still needed, or if the Agreement may be lapsed. Those identified as needed will have the review date extended an additional two (2) years prior to initiating a new Affiliation Agreement.

Affiliation Agreements inactive for seven (7) years shall be archived on GVSU's contract management system (Contract Logix) and hard copies shall be shredded after an additional seven (7) years.

III. INTERNATIONAL STUDENT PLACEMENT TRAINING SITE AGREEMENTS

When a Program Coordinator has identified an **approved** international location for a student placement, a student-specific *International Student Placement Training Site Agreement* must be established between the agency and GVSU. International placements differ from domestic placements in that they generally require more research, student preparation, paperwork, and possibly international-specific immunizations. When arranging for independent study abroad, specific procedures should be followed to ensure that the student is well-prepared to travel, live, and work abroad, and to minimize potential safety hazards and liability risks.

It is recommended that students plan to meet with the Padnos International Center (PIC) at least four (4) months prior to departure in order to have adequate time to plan and prepare for international travel necessities, to establish an *International Student Placement Training Site Agreement* and to complete all health compliance/immunization requirements.

To achieve an optimal international student placement experience, a collaborative approach involves the following individuals: (See Exhibit A).

- Student
- Program Coordinator
- Padnos International Center (PIC) Coordinator
- Health Compliance Contract Administrator (Affiliation Agreement)
- Health Compliance Office (health compliance requirements)

IV. ACCOUNTABILITY

A. Associates

Faculty coordinating student placements in affiliated organizations are responsible for approving student placements based on health compliance requirements being met prior to any participation in a placement at an affiliated organization.

Health compliance requirements for each program shall be established based upon CDC Guidelines for Health Care Personnel (HCP) as well as requirements frequently reflected within the Affiliation Agreements. All Associates are responsible for protecting their own health and the health of clients or research participants with whom they interact by attaining and maintaining compliance with identified health compliance requirements.

Students and volunteers maintain full financial responsibility for obtaining all compliance requirements. Faculty and staff compliance requirements shall be paid for by the GVSU Health Compliance Program when authorized health care providers and vendors are used. Faculty and staff members are financially responsible for obtaining and maintaining professional licensing and specialty certification. A list of health compliance requirements and authorized providers and vendors shall be communicated to affected faculty and staff.

By the required due date specified on the health compliance account, Associates must achieve compliance with all requirements applicable to the program to which they have been admitted or employed. Students

must maintain full compliance with all requirements until the student has graduated, or until the program has submitted written communication to the Health Compliance Office that all placement activities required for graduation have been completed.

Faculty, staff, and volunteers are to attain and maintain full compliance with all requirements throughout their tenure with the GVSU.

Consequences for Non-Compliance: Health compliance audits will be conducted on a regular basis. Reports will be forwarded to the appropriate Program Coordinator with the recommendation that Associates who fail to attain or maintain compliance by their program's due date or as otherwise required be restricted from any placement activities at affiliated organizations until compliance is achieved.

GVSU Associates participating in health compliance regulated programs should retain their original documents. Direct uploading of electronic document files into an individual's health compliance account is recommended to eliminate paper copies, minimize risk in a breach of confidentiality, and to decrease errors.

Additional requirements may be contractually mandated by affiliated organizations to which Associates are placed. These additional requirements are non-negotiable. To the extent known, additional requirements are documented in Contract Logix. Program Coordinators are responsible to review contractual requirements for each placement site either on Contract Logix, or via the Excel spreadsheet distributed monthly by the Health Compliance Coordinator. The Program Coordinator will notify the Health Compliance Office of any Associate with additional health compliance requirements. The Health Compliance Office will indicate the additional requirements in the Associate's health compliance account and track for completion.

Each semester, upon request from the Health Compliance Office, Program Coordinators will submit their program's placement data for entry into the GVSU contract management system. The data required for each student placement includes the following: student's first and last name, last four digits of student's G#, student's email address, clinical course number, name of facility of placement, facility agency (affiliation agreement entity), facility address, timeframe of placement and total number of hours. When the placement involves a preceptor, the following information should be provided: assigned preceptor's first and last names, and each assigned preceptor's email address. Submission must conform to requested format.

In the event that a student leaves a program, or a placement, prior to completing the rotation, the Program Coordinator will inform the student's preceptor and the Health Compliance Office of the student's departure.

B. Health Compliance Office

All compliance records will be maintained for current students and made accessible to the student after graduation.

Compliance records for Associates will be maintained while the individual is affiliated with GVSU. Records will be archived after a minimum of one year of inactivity and retained for seven years.

Duties of the Health Compliance Office include, but are not limited to:

- Negotiate, execute, and maintain Affiliation Agreements (new/renewals)
- Develop and submit reports related to placements including, but not limited to, NC-SARA reports for the Office of the Provost
- Communicate periodically to Program Coordinators regarding updates to Affiliation Agreements and additional health compliance requirements
- Administer the GVSU Health Compliance Vaccine Exemption process

- Provide support for accreditation body visits relating to Affiliation Agreements and health compliance, upon request
- Administer and maintain health compliance requirements on Blackboard and health compliance system.
- Update health compliance training modules annually, including, but not limited to:
 - Bloodborne Pathogens
 - Tuberculosis (TB)/ Infection Control
 - Family Educational Rights & Privacy Act (FERPA)
 - Elder Justice Act of 2009
 - Health Insurance Portability and Accountability Act (HIPAA)
 - Intellectual Property
- Review and maintain documents submitted to Health Compliance organizations on Blackboard.
- Audit health compliance vendor review process to ensure compliance with GVSU policy.
- Provide for Associates, upon request and as outlined in Affiliation Agreements, clinical passport letters or other forms of compliance attestation.
- Generate, process, and maintain record of preceptor *Affiliated Clinical and Research Faculty* appointment letters and certificates.
- Assist with obtaining placement sites, as needed.
- Ensure that required items submitted meet standards set forth by GVSU, state and federal regulations, Affiliation Agreements, and the Centers for Disease Control and Prevention (CDC).
- Establish processes for notification and recommendation for participation restrictions for non-compliance.
- Notify Associates via email of non-compliance status and/or pending expiration of compliance items.
- Notification process for Health Compliance includes, but not limited to:
 - The first notification sent will include the initial enrollment instructions regarding health compliance system use, expectations, and the process for meeting requirements. Further, it will contain instructions on the notifications their program will receive if the Associate enters non-compliant status by not completing items by the due date; and, if non-compliant, Associate would not meet the requirements to enter affiliated organizations for placement activities.
 - Once the health compliance account is created, weekly reminder emails from health compliance software site (Viewpoint or CastleBranch) will begin to remind of any remaining tasks.
 - After the indicated health compliance due date, no additional notices will be sent to Associates who are non-compliant, and a list of those Associates that are non-compliant will be sent to the Program Coordinator.
 - Monitoring of each health compliance Associate account will continue for those compliance requirements that expire annually or periodically. Notification emails will be sent to Associates approximately 60-days prior to the expiration date by the health compliance office and 30-days prior to expiration date by the health compliance software (Viewpoint or CastleBranch).
 - Additional reminder emails or announcements will be sent as needed by the health compliance office.

V. PERSONAL PROTECTIVE EQUIPMENT (PPE)

All Associates will wear appropriate PPE while at a GVSU facility or an experiential learning placement site, in accordance with university requirements, experiential learning site requirements, CDC guidelines and any applicable regulatory requirements. The health compliance office facilitates PPE and/or respirator fit testing for students when the experiential learning placement site requires PPE and/or fit testing and has indicated that GVSU/student must provide the PPE. Written communication from the clinical site is required for the health compliance office to initiate the collaborative response to provide PPE and/or respirator fit testing for health-related students.

VI. Health Compliance Student Exposure Tracking – Aim: The health compliance office supports health-related programs with accreditation requirements for exposure tracking when students are in clinical experiences or simulated lab experiences.

- Students receive training on bloodborne pathogen (BBP) exposure at matriculation and annually.
- Students are expected to be fully immunized for Hepatitis B and provide documentation of a Hepatitis B surface antibody titer showing immunity.
 - If the student is a non-responder (negative titer following two complete vaccine series), they are required to follow up with their healthcare provider and sign an attestation acknowledging their risk.
 - The program is notified if students have a non-responder status or a medical or religious exemption for Hepatitis B vaccines following a negative Hepatitis B surface antibody titer.
- Students must follow [Occupational Safety and Health Administration \(OSHA\) Guidelines for Standard Precautions](#) in the classroom, laboratory, and clinical sites when the potential for exposure to hazardous materials or bodily fluids exists. This includes treating all blood and body fluids as infectious, hand hygiene, safe injection practices, safe sharps management and disposal, use of personal protective equipment, and environmental control measures.
- The following actions are required following a puncture or contamination event that occurs during enrollment in the Grand Valley State University health-related programs:
 - The student notifies the instructor/faculty and clinical preceptor (as applicable).
 - The student applies appropriate first aid measures (i.e., clean the wound with soap and water; flush mucous membranes with water/saline for 15 minutes).
 - The student reports the exposure to the GVSU Health Compliance Office through the exposure reporting link in health compliance BlackBoard organization.
- The following actions are required following a puncture or contamination event that occurs during a clinical placement at an affiliated organization:
 - The student immediately reports the exposure to the clinical preceptor and appropriate department following the individual clinical site protocol.
 - The student confirms that the source patient will be tested.
 - The student accesses the site's emergency department (as applicable) for testing and treatment as soon as possible. If the student is at an ambulatory location, the student accesses the nearest urgent care.
 - The student notifies the instructor of record and the GVSU Health Compliance Office through the exposure reporting link in health compliance BlackBoard organization following initial treatment and testing at the clinical site.
- The following actions are required following a puncture or contamination event that occurs at GVSU:
 - The student immediately reports the exposure to the appropriate faculty member and/or Simulation Center staff.
 - Faculty and/or Simulation Center staff contact the health compliance office 616-331-5812 to obtain authorization to treat.
 - The source patient/student is immediately sent to Corewell Health Occupational Health if incident occurs on the health campus or Munson Occupational Health if incident occurs on the Traverse City Regional Campus for testing.
 - Test results are communicated to the Health Compliance Officer. If needed, the exposed student is directed to the nearest Corewell Health or Munson Urgent Care for testing and counseling.
- All fees and costs accrued as a result of source student testing for exposures that occur at GVSU are covered by the College of Health Professions – Health Compliance Office. Follow-up testing/treatment can be done by the source student's healthcare provider and is the sole responsibility of the student and/or their health insurance.

- All fees and costs accrued as a result of an accidental exposure are the responsibility of the exposed student and/or their health insurance. The student and/or their health insurance will be billed, not workers' compensation or employee health. Follow-up testing/treatment can be done by the student's healthcare provider and is the sole responsibility of the student and/or their health insurance.
- Upon program matriculation, students are required to sign a Health Insurance Acknowledgment Form indicating their financial responsibility for any student exposure events.

VII. COMPLIANCE REQUIREMENTS

The following are detailed compliance elements that may be required for placements at health-related organizations as outlined in each Affiliation Agreement. Each program will communicate their specific health compliance requirements to all Associates.

A. Physical Exam

If required by the program, students must submit a completed *GVSU Health and Immunization Form* available in the Associate's health compliance account. The form must be completed by one of the following licensed professional healthcare providers within 12 months prior to submission: physician, nurse practitioner or physician assistant.

B. Immunizations & Serologic Titers:

Documentation of immunizations and titers, when required by program and/or affiliation agreement, must be submitted via one of the following mechanisms:

- *GVSU Health and Immunization Form* or *GVSU Immunization Form* completed/signed by a licensed professional healthcare provider within the 12 months prior to submission
- Copy of a state immunization registry or card
- Copy or screen print from a patient portal
- Printed or handwritten documentation of immunization verified by a healthcare provider
- Receipt from a pharmacy or healthcare provider showing name, date of service, service rendered
- Lab report (titer)

All documents must reflect the Associate's first and last name.

The following immunizations are required:

- Tetanus, Diphtheria, and Pertussis (Tdap) – Must Meet Criteria 1 and 2:
 - Criteria 1: One dose of Tetanus, Diphtheria, and Pertussis (Tdap) after age 10, regardless of when previous dose of Tetanus Diphtheria (Td) was received **AND**
 - Criteria 2: A Td or Tdap vaccination within the last ten years;
- Measles (Rubeola), Mumps and Rubella (MMR)
 - Documented two vaccinations **OR** titers results indicating immunity;
If vaccination documents are not available and/or one or more titers are negative or equivocal, vaccination/revaccination is required;
- Hepatitis B
 - A minimum of one complete immunization series of three doses of Engerix-B or Recombivax HB or two doses of Heplisav-B.
 - As required by program or affiliation agreement, a Hepatitis B surface antibody titer indicating immunity:
 - If the Associate's titer result is negative after initial vaccination series, a booster/challenge vaccine, and/or an entire second series of vaccinations is

- required, followed by a titer four to six weeks after last vaccination;
 - If repeat titer is negative following a booster/challenge vaccine, the remaining vaccines in the second series must be completed, followed by a titer four to six weeks after last vaccination in the series;
 - If the final titer is negative following an entire second series of vaccinations, the Associate is considered a non-responder and a signed *Hepatitis B Waiver-Non-responder form* will be required. A note will be made in the Associate's health compliance account regarding non-responder status and receipt of the form; If record of the initial series of Hepatitis B vaccination is unobtainable, and the titer indicates immunity, the Associate will be informed that the CDC indicates long term immunity cannot be confirmed on the basis of a positive titer alone and the Associate will be encouraged to receive a complete vaccination series. If the Associate chooses not to obtain additional vaccines, a signed *Hepatitis B Waiver-Lack of Vaccine Documentation with Positive Titer form* will be required. A note shall be made in the Associate's health compliance account regarding the effort to obtain the record, the result of titer indicating immunity, and receipt of the form;
- Varicella (Chicken Pox)
 - Documented two vaccinations **OR** titer results indicating immunity; If vaccination documents are not available and/or titer is negative, vaccination/revaccination is required;
- Influenza (Flu)
 - Annual influenza vaccination; Additional strain influenza, if applicable, and available;
- COVID-19 Vaccine
 - If previously vaccinated with full series (2-dose series prior to 2023): documented 2 Pfizer OR 2 Moderna OR 2 Novavax OR 1 Jansen/J&J vaccine. COVID-19 Booster(s) as outlined by the Centers for Disease Control and Prevention to meet "up to date" vaccine status, are strongly recommended for those previously vaccinated with primary series.
 - If unvaccinated: 1 bivalent vaccine (Pfizer, Moderna – Spikevax or mNexspike) OR 1 updated Novavax vaccines from the current available formulary.
- Meningococcal (Medical Laboratory Students only)
 - For Associates who are routinely exposed to isolates of *Neisseria meningitidis*:
 - One adult Meningococcal conjugate (ACWY) vaccination and a booster dose every five years
 - One Meningococcal B vaccination, followed by a booster at 1 year and then every 3 years thereafter.
 - One Meningococcal ABCWY combination vaccine, followed by a booster at 6 months. This vaccine may not be appropriate for regular booster doses unless Meningococcal B (due every 3 years) & Meningococcal ACWY (due every 5 years) were due at the same time.
- Hepatitis A (if required by placement site)
 - Two doses of Hepatitis A vaccine

C. Refusal to Consent to Vaccination

Associates who have a CDC recognized medical condition for which a vaccine is clinically contraindicated OR a sincerely held religious belief that prohibits them from receiving a vaccine, may submit an exemption request to the Health Compliance Vaccine Exemption Committee.

An approved exemption does not guarantee that a placement site will accept an Associate who does not

have documentation of all required vaccines and/or titers showing immunity. Some affiliated organizations will not accept Associates who have a medical and/or religious exemption for a required vaccine and/or who have declined a COVID booster.

When completing an exemption/declination form, an Associate is required to acknowledge that a vaccine exemption or declination may result in the inability to complete required placements which will affect the Associate's progress towards program completion.

1. Exemption/Declination Process:

- a) Measles, Mumps, Rubella, Varicella and Hepatitis B, which require documentation of a specific number of vaccines and/or titer(s) showing immunity:
 - a. The Associate must submit documentation of any vaccines previously received, as well as the required titer(s).
 - b. If the titer(s) is/are negative or equivocal for immunity, upon request from the Associate, the appropriate exemption request form will be provided by the Health Compliance Office with instructions on how to submit the form for committee review.
- b) COVID primary vaccine(s) Tetanus, Hepatitis A, and Meningococcal:
 - a. Upon request from an Associate, the appropriate exemption request form will be provided by the Health Compliance Office with instructions on how to submit the form for committee review.
- c) Influenza
 - a. Exemption requests may be submitted during the period that the flu vaccine for the current season is available, generally late August through April.
 - b. Upon request from an Associate, the appropriate exemption request form will be provided by the Health Compliance Office with instructions on how to submit the form for committee review.
- d) For the COVID booster,
 - a. Upon request from an Associate, the appropriate declination form will be provided by the Health Compliance Office with instructions to submit the declination form directly to the Associate's health compliance account.

Vaccines that have been declined or that have an approved exemption will be identified on health compliance audits, including titer status when appropriate.

Program Coordinators will follow the affiliated organization's criteria for placement of an Associate with a vaccine exemption, if known OR notify affiliated organization of vaccines that have been declined and/or have an approved exemption and request information on the affiliated organization's protocol for the declined/exempted vaccines and provide this information to the Associate.

If an affiliated organization's criteria do not allow placement of an Associate with incomplete vaccines, the Program Coordinator will determine if placement can occur at another affiliated organization. If placement is not possible, the Program will communicate with the Associate to determine whether degree progression or employment can continue.

D. Tuberculosis (TB) Screening and Testing

For Associates entering the annual TB testing program who have not completed a TB test in the past 12 months, initial TB screening will be validated by:

- ONE of the following methods of initial TB testing:
 - Two (2) Mantoux TB Skin Tests (2-step TB testing)

- Documentation of two separate TB skin tests, each read within 48-72 hours of being placed. The two TB skin tests must be placed at least 7 days apart, and no greater than 12 months apart, to be considered 2-step baseline testing.
- If both tests meet the above criteria and are each documented “negative,” the Associate should be classified as having a “negative baseline 2-step TB skin test” result.
- An Associate can then follow up with an annual single TB skin test.
- If annual TB testing requirement is not completed within 14 months of the previous TB test, it cannot be considered a consecutive annual test, and 2-step TB skin testing will need to be repeated.
- If a TB skin test is documented “positive,” further medical evaluation including a radiology report (chest x-ray) is required prior to the start of any placement OR
- One (1) Interferon-Gamma Release Assay (IGRA) TB Blood Test
 - Documentation of lab report for one of the following types of IGRA TB Blood Test: T-Spot or QuantiFERON Gold. One of these TB blood tests may be completed instead of 2-step TB skin testing.
 - If an IGRA TB blood test lab report is documented as “negative,” the Associate should be classified as having a “negative baseline TB blood test” result.
 - An Associate can then follow up with an annual single TB skin test or IGRA TB blood test.
 - A “positive” IGRA means that the Associate has been infected and an additional medical evaluation is required prior to the start of any placement to determine if the disease is latent or active.
 - For individuals who have received the Bacillus Calmette-Guerin (BCG) vaccine, an IGRA is the preferred testing method as it is less likely to give a false-positive result.
 - If initial TB testing is performed by IGRA TB blood test, it is recommended, but not required, that subsequent annual testing be completed by IGRA TB blood test as well.

If history of a positive TB test, submission of the positive TB test document if available, a *Tuberculosis (TB) Risk Assessment and Symptom Screening* questionnaire, and a radiology report showing a negative chest x-ray dated any time after the positive TB test, are required.

GVSU prohibits Associates from interpreting their own TB testing results or from asking faculty to make this determination.

E. Observation

An observational experience is one where a student follows a professional with the objective of learning about a specific career. A student participating in an observational experience is not expected to have hands-on contact with a patient/client. Students participating in observation at GVSU, or with an outside entity who has not specified health compliance requirements, will be required to submit documentation of the following:

- 2 MMR vaccines or titers that reflect immunity,
- 2 Varicella vaccines or a titer that reflects immunity,
- 3 Hepatitis B vaccines
- 1 Tdap after age 10; and a current tetanus (Td or Tdap) vaccine within the last 10 years,
- Completed COVID-19 primary vaccine series,

- Two (2) Mantoux TB Skin Tests (2-step TB testing) or One (1) Interferon-Gamma Release Assay (IGRA) TB Blood Test,
- Current influenza vaccination if experience occurs at any time between October–April
- Completion of training modules for Bloodborne Pathogens, FERPA, Elder Abuse, HIPAA, Intellectual Property and TB & Infection Control.

F. Cardiopulmonary Resuscitation (CPR) Certification

CPR certification is specific to program accreditation requirements. Certification must remain valid. ACLS does not fulfill the requirement for CPR certification. Courses and skills sessions that are entirely online and/or completed via Zoom or other similar online platform, are not acceptable for initial or renewal CPR certification. Hybrid CPR courses (where the classroom portion of the course is completed online, and the skills evaluation is completed in-person with a certified instructor) are acceptable.

G. Advanced Cardiovascular Life Support (ACLS) Certification

ACLS certification is specific to program accreditation requirements. Certification must remain valid. Online initial or renewal ACLS certification courses are not acceptable sources for certification.

H. Criminal Background Check

Upon matriculation, hire, or as identified by program, Affiliation Agreement, or affiliated organization request, a criminal background check, which minimally includes the following elements, is performed: Residency History (seven (7) years), Michigan Statewide Criminal Records (ICHAT), National Sexual Offender Index, and National Healthcare Fraud and Abuse (OIG) Scan. Some affiliated organizations may require additional elements. Criminal background checks must be completed through a GVSU designated vendor. An exception may be made when the experiential learning location is the Associate's current employer, and the Health Compliance Office receives written notification from the affiliated organization, that the Associate's background check conducted at hire or during employment was accepted, and that an additional background check is not required for experiential learning. Notification must be sent from an individual with signature authority for the organization to the Health Compliance Office. Directions to complete a criminal background check are available to the Associate through their health compliance account.

Criminal background check results are reviewed by the Health Compliance Office. If deemed necessary, the Health Compliance Office will notify the designated Program Coordinator for students or volunteers and will notify the Dean of the College for faculty or staff. The discovery of a criminal record will not necessarily result in the revocation of an acceptance offer or expulsion from a program of study. Convicted offenses that are subject to the rules of the State Mandatory Exclusion Regulations may result in the loss of placement opportunities at affiliated organizations. As placements may be a required component of the curriculum, the loss of training opportunities may affect a student's ability to meet requirements for graduation. Convicted offenses may also result in a student's inability to sit for professional licensure exams.

Associates have the right to review the criminal background check reports for accuracy by contacting the judicial institution or background check vendor.

The Program Coordinator or Dean of the College may call together the *Committee for Establishing Practice Guidelines* to assist in determining the course of action if needed.

All Associates are required to notify the Health Compliance Office of any convictions, arrests, charges, or investigations by any law enforcement authorities that occur after the initial criminal

background check is completed. The Dean of the College and/or their designee will be notified by the Health Compliance Office if known additional criminal investigations occur.

Subsequent criminal background checks may be required.

I. Drug Screen

Upon matriculation, hire, or as identified by program, Affiliation Agreement, or affiliated organization request, a drug screen shall be performed. The GVSU standard is a 10-panel urine drug screen, however some affiliated organizations may require additional tests. Drug testing must be completed through a GVSU designated vendor and dilute negative results cannot be accepted. An exception may be made when the experiential learning location is the Associate's employer, and the Health Compliance Office receives written notification from the affiliated organization that the Associate's drug screen conducted at hire or during employment was accepted, and that an additional drug screen is not required for experiential learning. Notification must be sent from an individual with signature authority for the organization to the Health Compliance Office. Directions to complete a drug screen are available to the Associate through their health compliance account.

Non-negative drug screen results are reviewed by the designated vendor's Medical Review Officer (MRO). For dilute negative results or non-negative results declared by the MRO, Associates will be given the opportunity to repeat the drug screen within two weeks from the date of notification (at the Associate's expense) for confirmation of results. For non-negative results, the Health Compliance Office will notify the designated Program Coordinator for students or volunteers and will notify the Dean of the College for faculty or staff.

The Program Coordinator or Dean of the College may call together the *Committee for Establishing Practice Guidelines* to assist in determining the course of action if needed.

Subsequent drug screens may be required, and clinical partners may request randomized drug screening.

J. Fingerprinting

Upon matriculation, hire, or as identified by program, Affiliation Agreement, or affiliated organization request, fingerprinting shall be performed. Fingerprinting reports must be obtained through a designated Live Scan vendor. Directions to complete fingerprinting are available to Associates through their health compliance account.

Fingerprinting reports will be reviewed by the Health Compliance Office. The Health Compliance Office will notify the designated Program Coordinator for students or volunteers and will notify the Dean of the College for faculty or staff, if convictions found by either the Michigan State Police or FBI deem the Associate unsuitable for placement at organizations affiliated with GVSU as outlined by State law, in addition to, all Tier I, Tier II and Tier III sexual offenses. GVSU may not disseminate fingerprinting results to another entity per federal and State of Michigan law.

The program representative or Dean of the College may call together the *Committee for Establishing Practice Guidelines* to assist in determining the course of action if needed.

Subsequent fingerprinting may be required.

K. Health Compliance Training Modules

To be completed online upon initial entry to health compliance, and/or annually as indicated, through the Blackboard Health Compliance site with a score of 80% or greater to pass.

| Training Module | Initially | Annually |
|---|-----------|----------|
| Bloodborne Pathogens/ Standard Precautions | X | X |
| Health Insurance Portability and Accountability Act (HIPAA) | X | X |
| Tuberculosis (TB)/Airborne Pathogens and Infection Control | X | X |
| Family Educational Rights & Privacy Act (FERPA) | X | |
| Elder Justice Act of 2009 | X | |
| Intellectual Property | X | |

L. Current and Unrestricted Professional License (if applicable)

Licensed Associates are financially responsible to maintain a current unrestricted license to practice throughout their tenure with the university. A copy of the current license must be submitted to the Associate's Health Compliance account.

M. Respirator FIT testing

Respirator FIT testing may be completed as required by the specific program or placement site and Associate may be responsible for cost. Directions available by contacting the Clinical Initiatives Specialist.

N. Color Blind Testing

Color Blind Testing will be completed as required by the specific program. Directions available through the Associate's health compliance account.

O. Authorization to Release Information

All Associates must review and submit the *Authorization and Family Education Rights and Privacy Act (FERPA) Release* form. This form is available through the Associate's health compliance account.

P. Health Insurance Acknowledgment Form

All Associates must review and submit the *Health Insurance Acknowledgment* form. This form is available through the Associate's health compliance account.

Q. Simulation Center User Agreement and Photo Release

All students whose program includes the use of the GVSU Simulation Center, will be required to review and submit the *Simulation Center User Agreement* and *Simulation Center Photo Release* forms available through the Associate's health compliance account. If a student chooses to decline submission of the *Simulation Center Photo Release* form, written declination will be required (email is acceptable) and the student's faculty advised that the student's Associated media (i.e. simulation videos) cannot be shared for educational purposes.

R. Renewable Compliance Requirements

The following are to be renewed prior to due date indicated within the Associate's health compliance account.

a. Annually:

- TB screening or if history of a prior positive TB test, completion of *Tuberculosis (TB) Risk Assessment and Symptom Screening* questionnaire
- Influenza vaccination
 - Additional strain influenza vaccination if applicable and available
- Training modules for Bloodborne Pathogens, HIPAA, TB & Infection Control,

b. Variable Timeframe:

- Tetanus vaccine (Td or Tdap)
- CPR certification
- ACLS certification
- COVID booster vaccines
- Respirator FIT testing
- Professional licensure (if applicable)

S. Resources

Unless otherwise stated in this Policy, Associates may obtain health compliance requirements with a healthcare provider of choice. References for additional healthcare and service providers are located through the Associate's Health Compliance account.

References:

Centers for Disease Control and Prevention. Recommended Vaccines for Healthcare Workers.

<https://www.cdc.gov/mmwr/preview/mmwrhtml/00050577.htm> Reviewed January 22, 2025

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Exhibit A

International Student Placement Training Site Agreement Procedure

1. Student contacts an international agency approved by Padnos International Center (PIC) and is accepted for a student placement experience. Student will inform Program Coordinator and provide agency name, address, phone number and contact information including name, title, phone number, and email address.
2. Program Coordinator will contact agency to determine if agency and preceptor (supervisor) meet program licensure and accreditation requirements needed for course credit before proceeding with international placement site arrangements.
3. Program coordinator will verify with PIC that the site has received their approval.
4. Program Coordinator will request an *International Student Placement Training Site Agreement* to be established by the Health Compliance Contract Administrator and provide the following information:
 - International agency's name and address
 - International agency's representative's name, title, email address and phone number
 - Student's planned international clinical placement site start date (month/year)

The Health Compliance Contract Administrator will notify the Program Coordinator when the agreement has been fully executed. If there are any difficulties in establishing the agreement, the Health Compliance Contract Administrator will inform the Program Coordinator in a timely manner.

5. Once international placement site is approved by Program Coordinator, student and Program Coordinator will meet to discuss details of the placement process. Program Coordinator will direct student to the PIC website and will inform student of his/her responsibility for preparing for international travel, work, and living arrangements.
6. Students must carefully read all information and follow PIC procedures regarding Study Abroad Independent Study: (<https://www.gvsu.edu/studyabroad/independent-study-606.htm>).
7. Students must make an appointment to meet with the PIC Coordinator for Study Abroad & International Partnerships. Student must bring all information about the program/agency, a completed and signed faculty supervisory form, and a course syllabus.
8. Student must complete an online OASIS Independent Study Application on the PIC website. The Independent Study Application will be reviewed by the PIC Coordinator. **Acceptance for an independent study program through PIC is not guaranteed.**
9. Student must follow the Pre-Departure Guide/Timeline to ensure that all necessary arrangements are met:
 - Passport and Visa applications
 - Arrangement for independent study program credit
 - Financial and travel arrangements
 - Travel Warning and Assumption of Risk and Liability waivers, if applicable

- Health and immunization requirements (coordinated with Health Compliance Office once destination is determined)
 - Familiarity with the travel destination legalities, customs, culture, and language
 - Register trip with U.S. State Department
 - Develop an emergency plan and exchange emergency contact information with family, PIC staff, and Program Coordinator
10. Attend all pre-departure meetings as required by PIC Coordinator and student will meet no later than two (2) weeks prior to departure to review arrangements. Student will provide PIC Coordinator with contact information (email, phone numbers, social media accounts, etc.) that student will use while abroad.
 11. Program Coordinator will follow student's progress at the agency throughout the course of the internship. Student will remain in contact with Program Coordinator as pre-arranged prior to the student's departure for the placement.
 12. Student will remain in contact with PIC Coordinator weekly (via personal or mass email, phone, blog, and/or social media accounts) and will inform PIC Coordinator if traveling to other locations/destinations during the internship.