Observation Experience Agreement

Prior to starting your observation experience at the Hospital for Sick Children ("SickKids") you are required to sign this Agreement. This document describes your responsibilities during your experience and other important information you should know. By signing, you agree to the following:

1. Your Observation experience cannot compromise the patient care and/or service objectives of SickKids. SickKids staff is the final authority for the integration of your observation experience into SickKids. Each patient has the right to refuse to be a participant in your observation experience.

2. You must comply with all rules, regulations, guidelines, policies and procedures of SickKids ("SickKids Policies") and maintain appropriate behaviour while at SickKids. SickKids has the right at any time in its sole discretion to terminate your observation experience, require you to leave or refuse you admission to its premises because of your conduct.

3. You must respect patients’ privacy and keep patients' records and all other hospital information confidential. If confidentiality is breached, in addition to any rights and legal remedies of SickKids, your observation experience may be terminated immediately.

4. If you visit exceeds 5 days you must provide satisfactory documentation of 2-step TB testing and of immunity to rubella, measles and chicken pox as per SickKids Occupational Health and Safety requirements. Failure to provide such documentation will delay your start date. You acknowledge and agree that SickKids may conduct a criminal check prior to the start of your observational experience at SickKids, you shall agree to provide all forms necessary for such criminal checks. The refusal to submit a criminal check may delay your start date or terminate your observation experience.

5. You are responsible for the following:
   a. all financial cost you incur arising from your observation experience including, but not limited to, the cost of meals, uniforms, uniform laundering, accommodations, parking, transportation and emergency medical care;
   b. orienting yourself to SickKids, your assigned practice area and the SickKids Policies; and attending the SickKids orientation session if applicable; and
   c. meeting the required standards and obtaining the necessary certifications, registrations and licenses applicable to your observation experience.

6. SickKids does not carry insurance that would provide you coverage in the event of accidental injury or damages and does not accept any responsibility for any accidental injury you may incur during your observation experience. You are responsible for obtaining such coverage for yourself.

7. You agree that, with the exception of scholarly works, all intellectual property you create while at SickKids, either on your own or with others, through work, study or research and development activities, will be the property of SickKids. You agree to irrevocably transfer all of your rights, title and interest in and to the intellectual property to SickKids. You will waive any moral rights in favour of SickKids, or persons acting under or with the authority or permission of SickKids. You agree to sign and give SickKids any agreements, assurances, undertakings, acknowledgements or other documents reasonably required relating to the intellectual property during your visit or afterwards.

8. This experience is an observational only and you may not participate in patient care.

I have read and understood the above this ____________ day of __________________, 20_________
Print Name: ________________________________Signature:________________________________
Agency/Hospital/Institution Name:_______________________________________________________
Duration of Experience (dd/mm/yyyy) from: ____________________ to: _______________________

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