

APPENDIX K

Assumption of Risk

Clinical/field experiences (practicum, clinical rotations, supervised practice, internships, or observations) are a required component of selected academic programs at Western Kentucky University College of Health and Human Services. These experiences allow students to practice skills and techniques learned in didactic and lab courses as well as develop critical thinking skills that are important for health care providers and human service professionals. Clinical/field experiences occur in hospitals, clinics, schools, community organizations, and other appropriate settings where students can interact with patients and clients. Students may have the opportunity to be placed in a different setting, but alternative site options are not always available, and changes may delay the completion of the student's degree.

Sites selected for students' clinical/field experiences are required to take reasonable and appropriate measures to protect students' health and safety in the clinical setting. In addition, faculty may develop course specific policies and procedures relating to student safety and prevention of exposure to disease, which will be in your syllabus or other program materials. Finally, each site will have their own infection control procedures. Students will be expected to follow both the university requirements and individual site requirements to decrease their risk of illness and/or injury while in the clinical/field setting.

Students will receive training related to potential hazards and prevention techniques. This training at a minimum will include reviewing the video links below and may include additional program specific training in a lab setting.

Students have the responsibility to report any infectious disease exposures (either from the clinical/field setting or from the general community setting) to their WKU clinical faculty member.

However, even with such measures, there are risks inherent to clinical/field experiences. Potential risks of completing clinical/field experiences include, but are not limited to:

- Exposure to infectious diseases through blood or other body fluids via skin, mucus membranes or parenteral contact
- Exposure to infectious diseases through droplet or air-borne transmission
- Hazardous chemical exposure
- Radiation exposure
- Environmental hazards, including slippery floors and electrical hazards
- Physical injuries, including back injuries
- Psychosocial hazards
- Offensive, inappropriate, or dangerous conduct by patients or clients, including violence, harassment, and sexual harassment

These risks can lead to serious complications, trauma, bodily injury, or death.

SPECIAL NOTICE REGARDING COVID-19

COVID-19, the disease caused by the novel coronavirus, is a highly contagious disease that causes symptoms that can range from mild (or no) symptoms to severe illness. There is a high potential for exposure from persons who are unaware that they are infectious, including other students.

Individual responses to COVID-19 can range from no symptoms at all, to severe and lasting health complications, including death. Although anyone who contracts COVID-19 may experience severe complications, the Centers for Disease and Prevention (CDC) has found that individuals with certain underlying health conditions are at higher risk of developing severe complications from COVID-19. These medical conditions include chronic lung disease, asthma, conditions that cause a person to be immunocompromised, obesity, diabetes, chronic kidney disease and liver disease.

Due to the nature of the current pandemic, students will be expected to always wear masks in the clinical/field setting, and while in classrooms, labs, hallways, bathrooms and other indoor spaces. Social distancing will also be required, except when giving direct care that makes distancing impossible. These expectations will be in place for the duration of the pandemic.

Everyone is at risk of contracting COVID-19. Because of the high number of asymptomatic COVID cases, students working in the clinical setting may be exposed to staff, visitors or patients who have COVID, even when not assigned to care for known COVID patients. Therefore, students will wear whatever level of PPE the clinical facility requires while in the clinical facility and follow faculty instructions and clinical facilities policies concerning distancing, masks, and where it is safe to remove PPE to eat and drink.

Vaccinations

Vaccinations for COVID are highly recommended and may be required by individual clinical facilities. Students must meet the requirements for each facility before going to their clinical assignments. Progression in the nursing program is not possible without obtaining the required number of clinical hours, so students can expect that they will have to obtain appropriate vaccinations for COVID, as well as for influenza and other infectious diseases.

Donning and Doffing PPE

This video demonstrates use of higher levels of PPE, including N-95 masks, isolation gowns, face shields and gloves. Since students will not be assigned to COVID-19 patients, lower levels of PPE are likely to be required in most situations (hand hygiene, surgical masks, and/or face shields), but students should know how to don and doff higher level PPE. Videos: Donning and Doffing PPE

Additional Information about COVID-19 and protecting yourself:

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html>

Please initial each statement and sign below.

- _____ I am at least 18 years of age.
- _____ I understand that I may be at increased risk for exposure to infectious disease, including COVID-19, during classes, laboratory experiences, and clinical/field experiences.
- _____ I have accessed and reviewed the above linked resource information and I understand how To safely put on and take of PPE to prevent infectious diseases, including COVID-19.
- _____ I understand and agree to use appropriate hand hygiene, social distancing, and PPE to decrease my risk of exposure to infectious disease during my learning experiences.
- _____ I understand that I will be asked to leave the class, lab, or clinical/field setting if I am unable or unprepared to use appropriate PPE to decrease my risk of exposure to infectious disease during my learning experiences.
- _____ If I become ill or if I am made aware that I have been exposed to an infectious disease, I agree to self-quarantine and contact my course faculty member(s) using distance methods.
- _____ I accept the potential increased risk for contracting infectious disease, including COVID-19, if I choose to participate in this academic program which includes clinical/field experiences.
- _____ My participation in a clinical/field experience program is entirely voluntary and I have carefully considered the attendant risks of such participation, up to and including illness or death.
- _____ I agree to indemnify and hold harmless Western Kentucky University and the clinical/field site of any exposure, illness, disability or sequelae and illness or injury occurs.
- _____ I understand that I, myself, am responsible for any and all costs and financial obligations associated with exposure, testing, and treatment for COVID-19 or any other infectious disease during a clinical/field experience associated with my degree program or certificate.
- _____ I understand that I have the right to determine that the risks of participating in clinical/field experience at this time is unacceptable to me, personally.
- _____ I understand that I have the right to withdraw from clinical/field experiences, take a leave of absence or pursue didactic coursework alone and as available.

My signature below indicates my understanding of all of the above as well as my intent to voluntarily continue in my degree program or certificate with participation in clinical/field experiences as required.

Student Signature

Date

Student (print name)

If you do not agree to all of the above:

_____ I understand that I have the right to withdraw from clinical experiences, take a leave of absence, or pursue didactic coursework alone and as available.

My signature below indicates my intent not to continue my participation in clinical experience at this time, I understand that I may rescind this decision at a later date by completing an updated form.

Student Signature

Date

Student (print name)