

**INTERNSHIP AGREEMENT**

This Agreement is entered into as of this \_\_\_\_\_ day of \_\_\_\_\_ month \_\_\_\_\_ year by and between Saddleback Medical Center, a California not-for-profit public benefit corporation (“Company”) and \_\_\_\_\_ (“Intern”). The purpose of this educational internship is for Intern to learn about healthcare management and gain valuable insight and experience. In consideration of the mutual agreements set forth herein, the parties hereby agree:

1. The internship is related to an educational purpose and there is no guarantee or expectation that the activity will result in employment with the Company. The education received by the Intern from the internship is for the express benefit of the Intern. The Intern does not replace or displace any employee of the Company. The Intern will receive direct and close supervision by an appropriate supervisor. The Intern acknowledges and agrees that Intern is not entitled to wages or compensation or benefits for the time spent in the internship.

2. The Intern specifically agrees to and acknowledges the following:

a. The Intern will comply with the policies, procedures, rules and regulations of the Company site and comply with Company business practices and procedures, including but not limited to HIPAA privacy rules.

b. The Company may at any time in its sole discretion, terminate the internship without notice or cause.

c. Intern acknowledges that Intern will be subject to a background check consistent with Company policy, including the following: Verification of identity; criminal background check in all counties of residence and employment for the last seven (7) years; motor vehicle records trace; and Office of Inspector General (“OIG”) sanction trace.

d. Intern may be required to provide certification, upon request, that Intern has been immunized against certain common communicable diseases, as required by Company policy.

e. Intern understands and agrees that Intern shall arrange and pay for all of Intern’s own expenses, including transportation, maintenance, health care and living accommodations.

f. Intern shall act in a professional manner and dress appropriately.

g. Intern shall maintain adequate health care coverage and shall reimburse Company for any emergency health care or first aid provided by the facility.

COMPANY

INTERN

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name

\_\_\_\_\_  
Name



## STATEMENT OF CONFIDENTIALITY

A high level of trust is placed with the users of the medical center's computers, computerized patient care system, technical resources, voice mail and E-Mail systems and any future computer/electronic systems which may be put in place. This also includes hard copies of patient's medical records, employee's personnel files, information regarding the medical staff and information learned through the attendance at meetings or minutes from meetings. It is necessary that employees understand and acknowledge their responsibilities associated with these systems.

The following statements detail my responsibilities if and when I receive and use the systems detailed above or new systems, or have access to records detailed above. My access code and/or password is confidential. It is equivalent of my legal signature and identifies me uniquely to the system. I am responsible for all data viewed, entered into, changed, or extracted from the systems under my code. I will not disclose my access code/password to any medical center system to anyone, nor will I attempt to learn another person's access code/password.

I will not use another person's access code/password to view, enter, change or retrieve data on a computer system, with or without their expressed approval to do so. If I have reason to believe that the confidentiality of my code/password has been compromised, I will immediately notify my supervisor or Information Systems User Support.

I understand that all patient, physician, or employee data that is viewed, entered into, changed, or extracted from a computer system or hard copy file is confidential and part of the medical/legal record. I will not access data for which I have no responsibilities or need to know.

I understand that any misuse of my confidential access code/password or misuse of my ability to access hard copy records, or sharing information with outside agencies or parties, unless cleared to do so by the department director and/or Medical Records Director, is a violation of the MemorialCare Health System policy Regarding Confidentiality and will result in disciplinary action including immediate termination of my employment.

I understand that MemorialCare Health System retains the right, with or without cause or notice to the User, to access and monitor the Technology Information, including User e-mail, Internet usage, and screen level access to all MemorialCare Health System clinical and business systems. Anything created or stored on MemorialCare Health System Technology Resources, may, and likely will, be reviewed.

My signature below, which is a condition of my employment, acknowledges agreement with these statements and acceptance of the responsibilities and obligations noted above.

**My typed name below shall have the same force and effect as my written signature.**

\_\_\_\_\_  
User name

\_\_\_\_\_  
User Signature

\_\_\_\_\_  
Employee #

\_\_\_\_\_  
Date



## ADULT ABUSE/ASSAULT REPORTING STATEMENT

California Penal Code Section 11160. requires that MemorialCare Health System is to provide to all employees after January 1, 1994 the following statement regarding the reporting of adult assaultive or abusive conduct. California law requires that this statement be signed by the employee and retained by MemorialCare Health System.

Section 11160 of the Penal Code requires that any "mandated reporter" will report to law enforcement any patient who in his/her professional capacity, he/she has knowledge of or reasonably suspects has suffered from any wound or injury resulting from a criminal act or as a result of assaultive or abusive conduct.

"Mandated reporter" is defined as any health practitioner employed in a health facility, clinic or physicians office who in his/her professional capacity or within the scope of his/her employment has knowledge of, observes, or reasonably suspects the patient has suffered from any wound or injury inflicted on the person as a result of assaultive or abusive conduct (even if the person who suffered the wound, injury, assaultive or abusive conduct has expired, regardless of whether or not the wound or injury was a contributing factor to the death, and even if found during an autopsy).

"Adult" is defined as any person residing in this state between the ages of 18 and 64. who does not have physical or mental limitations which restrict his/her ability to carry out normal activities to protect his/her rights.

"Assaultive or abusive conduct" is defined as murder; mayhem; aggravated mayhem; torture; assault with intent to commit mayhem, rape, sodomy or oral copulation; administering controlled substances or anesthetic to aid in commission of a felony; battery; sexual battery; incest; corrosive acid, or caustic chemical with intent to injure or disfigure; assault with a stun gun or taser; assault with a deadly weapon, firearm, assault weapon or machine gun or by means likely to produce great bodily injury; rape; spousal rape; procuring any female to have sex with another man; child abuse or endangerment; abuse of spouse or cohabitant; sodomy; lewd and lascivious acts with a child; oral copulation; genital or any penetration by foreign object; elder abuse; an attempt to commit any crime specified (above).

I certify that I have read and understand this statement and will comply with my obligations under the adult abuse/assaultive conduct reporting law.

My typed name below shall have the same force and effect as my written signature.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



## **CHILD ABUSE REPORTING**

California Penal Code Section 11166.5 requires MemorialCare Health System to provide all "child care custodians," "medical practitioners," and "nonmedical practitioners" who commence employment on or after January 1, 1985 with the following statement. California law requires that this statement be signed by the employee as a prerequisite to employment and retained by MemorialCare Health System.

Section 11166 of the Penal Code requires any child care custodian, medical practitioner, nonmedical practitioner or employee of a child protective agency who has knowledge of or observes a child in his or her professional capacity or within the scope of his or her employment who he or she suspects has been the victim of a child abuse to report the known or suspected instance of child abuse to a child protective agency immediately or as soon as practically possible and to prepare and send a written report thereof within 36 hours of receiving the information concerning the incident.

Child care custodian means a teacher, administrative officer, supervisor of child welfare and attendance, or certificated pupil, personnel employee of any public or private school; and administrator of a public or private day camp, a licensee, administrator, or employee of a community care facility license to care for children; head start teacher; a licensing worker or licensing evaluator; public assistance worker; employee of a child care institution, including but not limited to, foster parents, group home personnel and personnel of residential care facilities; a social worker or probation officer.

Medical practitioner means a physician and surgeon, psychiatrist, psychologist, dentist, resident, intern, podiatrist, chiropractor, licensed nurse, dental hygienist, or any other person who is currently license under Division 2 (commencing with Section 500) of the Business and Professions Code, any Emergency Medical Technician I or II, paramedic or other person certified pursuant to Division 2.5 (commencing with Section 1797) of the Health and Safety Code, or physiological assistant registered pursuant to Section 2913 of the Business and Professions Code.

Nonmedical practitioner means a state or county public health employee who treats a minor for venereal disease or any other condition; a coroner; a paramedic; a marriage, family or child counselor or religious practitioner who diagnoses, examines, or treats children.

I certify that I have read and understand this statement and will comply with my

obligations under the child abuse reporting law.

My typed name below shall have the same force and effect as my written signature

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Revised: 2/11  
Signature

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Date

## ELDER AND DEPENDENT ABUSE REPORTING

California Welfare and Institutions Code Section 15632 requires MemorialCare Health System to provide all "dependent adult care custodians" and "health practitioners" who are employees after January 1, 1986 (both continuing and new employees) with the following statement. The legal definition of "care custodian" includes all employees of a Medical Center. California law required that this statement be signed by the employee as a prerequisite to employment and be retained by MemorialCare Health System.

Section 15630 of the Welfare and Institutions Code requires any care custodian, health practitioner, or employee of an adult protective services agency or a local law enforcement agency who, in his or her professional capacity or within the scope of his or her employment has observed or has knowledge of an incident that reasonably appears to be physical abuse, abandonment, isolation, financial abuse, or neglect; or is told by an elder or dependent adult that he or she has experienced behavior constituting physical abuse, abandonment, isolation, financial abuse, or neglect, or reasonably suspects abuse is mandated to report that abuse. The suspected or alleged abuse must be reported to the adult protective services agency or the local law enforcement agency, unless the abuse occurred in a long-term care facility; in that case it must be reported to the ombudsman or local law enforcement agency. The report must be made immediately by phone and followed up within 2 working days with a written report. Abuse of an elder or a dependent adult includes physical abuse, neglect, financial abuse, abandonment isolation, abduction, or other treatment with resulting physical harm or pain or mental suffering, or the deprivation by a care custodian of goods or services that are necessary to avoid physical harm or mental suffering. (Welfare and Institutions Code section 15610.07)

Elders are persons 65 years of age or older. Dependent adults are persons between ages 18 and 64 with physical or mental limitations such as physical or developmental disabilities or age-diminished physical or mental abilities. Any person between the ages of 18 and 64 who is admitted as an inpatient in an acute care Medical Center is considered a dependent adult.

"Care custodian" means an administrator or an employee of any of the following public or private facilities:

- ◆ Health facility
- ◆ Clinic
- ◆ Home Health agency
- ◆ Educational institution
- ◆ Sheltered workshop
- ◆ Licensing worker or evaluator
- ◆ Public assistance worker
- ◆ Adult protective services agency
- ◆ Patient's rights advocate
- ◆ Nursing home ombudsman

- ◆ Camp
- ◆ Respite Care facility
- ◆ Residential care facility
- ◆ Community care facility
- ◆ Adult day care facility including adult day care facilities
- ◆ Regional center for persons with developmental disabilities
- ◆ Legal guardian or conservator
- ◆ Skilled nursing facility
- ◆ Intermediate care facility
- ◆ Local law enforcement agency
- ◆ Any other person who provides goods or services necessary to avoid physical harm or mental suffering and who performs such duties

"Health practitioner" means a physician and surgeon, psychiatrist, psychologist, dentist, resident, intern, podiatrist, chiropractor, licensed nurse, dental hygienist, marriage, family and child counselor, or any other person who is currently licensed under Division 2 (commencing with Section 500) of the Business and Professions Code, any emergency medical technician I or II, paramedic, a person certified pursuant of Division 2.5 (commencing with Section 1797 or the Health and Safety Code), or a psychological assistant registered pursuant to Section 2193 of the Business and Professions Code, a marriage, family and child counselor trainee, as defined in subdivision (c) of Section 4980.03 of the Business and Professions Code, or an unlicensed marriage, family and child counselor intern registered under Section 4980.44 of the Business and Professions Code, a state or county public health employee who treats a dependent adult for any condition, a coroner, or religious practitioner who diagnoses, examines, or treats dependent adults.

I certify that I have read and understand this statement and will comply with my obligations under the dependent adult abuse reporting law.

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Signature

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Date

## **DOMESTIC VIOLENCE/SPOUSAL ABUSE REPORTING**

California Penal Code Section 11160 requires that MemorialCare Health System is to provide to all employees after January 1, 1994 the following statement regarding the reporting of adult assaultive or abusive conduct. California law requires that this statement be signed by the employee and retained by MemorialCare Health System.

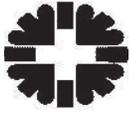
Section 11160 of the Penal Code requires that any "mandated reporter" will report to law enforcement any patient who in his/her professional capacity, he/she has knowledge of or reasonably suspects has suffered from any wound or injury resulting from a criminal act or as a result of assaultive or abusive conduct.

"Mandated reporter" is defined as any health practitioner employed in a health facility, clinic or physicians office who in his/her professional capacity or within the scope of his/her employment has knowledge of, observes, or reasonably suspects the patient has suffered from any wound or injury inflicted on the person as a result of assaultive or abusive conduct (even if the person who suffered the wound, injury, assaultive or abusive conduct has expired, regardless of whether or not the wound or injury was a contributing factor to the death, and even if found during an autopsy).

Domestic violence is an abuse committed against an adult or fully emancipated minor who is one of the following: 1) a spouse or former spouse; 2) a cohabitant or former cohabitant; 3) a person with whom the suspect has had a child; 4) a person with whom the suspect is having or has had a dating or engagement relationship.

Staff is mandated to immediately report instances of domestic violence in all cases in which a patient is receiving medical treatment for a physical condition or injury inflicted on the person as a result of assaultive or abusive conduct to the law enforcement agency where the abuse was committed. A written report must be sent to that agency within two (2) working days of receiving the information regarding the person.

"Assaultive or abusive conduct" is defined as murder; mayhem; aggravated mayhem; torture; assault with intent to commit mayhem, rape, sodomy or oral copulation; administering controlled substances or anesthetic to aid in commission of a felony; battery; sexual battery; incest; corrosive acid, or caustic chemical with intent to injure or disfigure; assault with a stun gun or taser; assault with a deadly weapon, firearm, assault weapon or machine gun or by means likely to produce great bodily injury; rape; spousal rape; procuring any female to have sex with another man; child abuse or endangerment; abuse of spouse or cohabitant; sodomy; lewd and lascivious acts with a child; oral copulation; genital or any penetration by foreign object; elder abuse; an attempt to commit any crime specified (above).



Consider the possibility of domestic violence if any of the following are observed:

- 1) Suicide attempt
- 2) Evidence of alcohol or drug abuse
- 3) Vague or non-specific physical or psychological complaints; i.e., fatigue, anxiety, depression, “nerves”, fearfulness, sleeplessness, ragefulness, loss of appetite and dissociation
- 4) Low self-esteem, sense of apprehension or hopelessness, crying, inappropriate laughing, avoidance of eye contact, angry, or defensive
- 5) Extent or type of injury inconsistent with patient’s explanation
- 6) Multiple injuries or fractures in various stages of healing
- 7) Injury to head, face, neck/throat, chest, breasts, or bilateral extremities.
- 8) Injury to abdomen, genitals, pelvic area, back, or spine
- 9) Unusual pattern of injuries; i.e., bilateral marks from a belt, rope, hairbrush, etc
- 10) Repeated use of Emergency Department services with multiple somatic complaints or injuries of increasing severity
- 11) Delay between injury and medical treatment
- 12) Patient minimizes frequency or seriousness of injury
- 13) Problems during pregnancy, specifically, preterm abortion, bleeding, intrauterine growth retardation, hyperemesis, and any other injuries
- 14) Self-induced abortions or multiple therapeutic abortions or miscarriages
- 15) Evidence of sexual assault
- 16) Signs of physical neglect (unclear physical appearance, decayed teeth, broken glasses, inadequately dressed, torn clothing, urine in clothing, overgrown nails, etc)
- 17) Eating disorders
- 18) Report of self-mutilation
- 19) Single-car accident (victim may also be passenger)
- 20) Burns (cigarette, friction, splash, or chemical)
- 21) Fecal impaction
- 22) Emotional abuse or family discord observed by staff
- 23) Overly controlling or protecting spouse/partner

I certify that I have read and understand this statement and will comply with my obligations under the Domestic Violence/Spousal Abuse reporting law.

My typed name below shall have the same force and effect as my written signature

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Signature

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Date