

Student Declaration



**University College Cork
School of Clinical Therapies**

Student Declaration

Introduction

Professional Clinicians seek to maintain high standards of conduct and moral judgement in their practices as clinicians, particularly in their relationships with their patients/clients, the public, fellow practitioners and with practitioners of other disciplines. The following declaration aims to bind student practitioners of the clinical therapies to sound moral reasoning and personal integrity in their professional conduct as student clinicians.

As a Clinical Therapy student, you will be studying to obtain a university degree that will allow you to work in a profession. During this period of study, you will be working within this professional environment. During your study you will gain practice experiences in various health care settings, interacting with individuals¹, members of staff², and other health care professionals. It is therefore essential that you agree with the conditions set out below to ensure that you can learn effectively. Failure to comply with the conditions set out in this agreement, which you will be asked to sign, may result in you not being allowed to continue in your programme.

1 'Individual' also refers to patient, client, resident, significant other, colleague, other health care professional

2 'Member of staff' refers to both academic and health service personnel.

I AGREE THAT:

1. I will listen to individuals and respect their views, treat individuals politely and considerately, and respect their privacy, dignity, and their right to refuse to take part in teaching.
2. I will act according to the Code of Professional Conduct and Ethics for my profession.
3. My views about a person's lifestyle, culture, beliefs, race, colour, gender, sexuality, age, social status, or perceived economic worth will not prejudice my interaction with individuals, members of staff, or fellow students. I confirm that I am willing to undertake physical examination of patients that may include physical contact, in order to establish a clinical diagnosis or make a professional judgement, irrespective of the gender, colour, culture, beliefs, disability or disease of the patient.
4. I will respect and uphold an individual's trust in me.
5. I will always make clear to individuals that I am a student and not a qualified practitioner.
6. I will maintain appropriate standards of dress, cleanliness, and appearance.
7. I will wear a health service provider identity badge with my name clearly identified.
8. I will familiarise myself and comply with the Health Service Provider's values, policies, and procedures.
9. I have read and understood the guidelines as set out in the current Practice Placement

Handbook

10. I understand and accept to be bound by the principle of confidentiality of individuals' records and data. I will therefore take all necessary precautions to ensure that any personal data concerning individuals, which I have learned by virtue of my position as a student, will be kept confidential. I confirm that I will not discuss individuals with any other party outside the clinical setting, except anonymously. When recording data or discussing care outside the clinical setting, I will ensure that individuals cannot be identified by others. I will respect all Health Service Providers' and individuals' records.
11. I have read and understand UCC's Grievance Procedure.
<https://www.ucc.ie/en/media/support/hr/policies/GrievanceProcedureAPPROVED.pdf>
12. I understand that, if I have (or if I develop) an impairment or condition, it is my responsibility to seek advice regarding the possibility that it may impact on my ability to learn, to perform safely in the clinical environment, or affect my personal welfare or the welfare of others. An appropriate person to seek advice from in the clinical setting may be the Practice Education Coordinator, Practice Tutor or Practice Educator. I understand it is also my responsibility to declare the impairment or condition on the relevant health disclosure form.
<https://www.ucc.ie/en/academicgov/aago-policies/fitnesstopractise/#self-disclosure-form>
I accept that only through disclosure of this impairment/condition can an appropriate plan of support to reach required clinical learning outcomes/competencies be explored.
13. I confirm that I shall not partake of or distribute illicit drugs or non-prescribed medications and avoid overindulgent use of alcohol, drugs, or medications.
14. I understand that if I have any criminal conviction(s) during the programme that I will declare same on the relevant Fitness to Practice disclosure form.
<https://www.ucc.ie/en/academicgov/aago-policies/fitnesstopractise/>
15. If I am returning from a period of illness/hospitalisation/surgery, it is expected that I report this to the Practice Education Team, as I may be required to attend the occupational health department prior to accessing my clinical placement.
16. I confirm that I shall endeavour to recognise my own limitations and shall seek help/support when my level of experience is inadequate to handle a situation (whether on my own or with others), or when I or other individuals perceive that my level of experience may be inadequate to handle a situation.
17. I shall conduct myself in a professional and responsible manner in all my actions and communications (verbal, written and electronic including text, e-mail or social communication media).

18. I will attend all scheduled teaching sessions and all scheduled clinical placements, as I understand these are requirements for satisfactory programme completion. If I am unable to attend any theoretical or mandatory/essential skills element (including online requirement) of the programme, I will notify a member of the Practice Education Team (prior to scheduled date) and provide a written explanation for the Module Leader as soon as possible. I will also inform the relevant team member prior to the commencement date of my clinical placement. If I am then unable to attend my scheduled clinical placement due to the above reasons, I will act according to Local Health Service Provider Guidelines and the Practice Placement Agreement, and will inform the relevant personnel in a timely manner e.g. Practice Education Coordinator, Practice Educator or Practice Tutor, as soon as possible.
19. I will abide by the Infectious disease policy.
<https://www.ucc.ie/en/media/support/studenthealthservice/InfectiousDiseaseScreeningImmunisationPolicyincludingBBVv4.pdf>

I know that I have a personal responsibility to protect myself, my patients and the general public from the potential transmission of viral respiratory tract infections and gastroenteritis. I will ensure that:

1. I am aware of, and have familiarised myself with, COVID-19 symptoms. Please see: <https://www2.hse.ie/coronavirus/>
2. I will not present myself to clinical placement (or to the University) if I have symptoms of viral respiratory tract infection or gastroenteritis.
3. In event that I develop a communicable infectious disease (for list see <https://www.hpsc.ie/notifiablediseases/listofnotifiablediseases/List%20of%20Notifiable%20Diseases%20February%202020.pdf>), I will immediately notify my programme director or deputy in my School so the School can communicate with the relevant HSE service in case it has implications for patients and staff.
4. I will keep myself up-to-date, and comply with, with current Public Health Advice regarding COVID-19.
5. If I think I have been in close contact with someone who has COVID-19, I will watch out for symptoms of COVID-19 for the next 14 days and take extra care to follow the advice on protecting others from COVID-19.
6. In advance of clinical placement, I will comply with all Infection Prevention and Control training required by my School and the HSE
7. I will ensure that I abide by, and comply with, the rule of 'bare below the elbows/bare above the wrist' while on clinical placement.

8. I acknowledge I have been (or will be) provided with provided with training, assessed and certified in performance of hand hygiene in advance of clinical placement and will undertake competence review at least once in each academic year.
9. I will comply with Infection Prevention and Control directions given by HSE and other Clinical staff at all times when I am in a clinical area, and any other measures the HSE has in place to prevent the emergence of COVID-19 while I am on clinical placement.
10. I will cooperate with requirements for management of outbreaks or other incidents of infection including providing samples for testing where required.

I acknowledge my Clinical Placement is subject to Public Health Advice which may be in place from time to time and that public health advice may result in changes to arrangements during the course of my Clinical Placement.

Data Protection

Any information disclosed to the University pursuant to this declaration will be treated with the highest standards of security and confidentiality and processed in accordance with the University's [Data Protection Policy](#). The University is collecting this personal data in light of the COVID-19 pandemic and to implement the requirements of the HSE in relation to the resumption of clinical placements. The legal basis for processing this data is based on protecting vital interests and for the reasons of public interest in the area of public health.

Adherence To University Rules

In addition to the preceding Student Responsibilities, Clinical Therapy students must also adhere to University College Cork Rules and Regulations.

SIGNATURE

I am signing to show that I have read and understood the above Declaration in this document, and I agree that I can and will comply with all of the Codes of Conduct detailed therein.