

Paid Keenan Research Summer Student **Forms** For PI/Managers

Paperwork must be completed 3 weeks prior to start date

Keenan Research Summer Students 2024 (Paid)

Dear Supervisor/Investigator,

These instructions are to register a Keenan Research Summer Research Student (Paid).

The Summer Student may not be eligible for the KRSS program if they reside outside of Ontario. Please reach out to ResearchEmployment@unityhealth.to prior to completing the paperwork if you have any questions. For more information on Out of Province hires, please refer to: https://unitynet.unity.local/departments-programs-services/research/research-employment/

The Keenan Research Summer Student (KRSS) Program provides opportunities for undergraduate and medical students to conduct research at Unity Health Toronto under the supervision of a principal investigator (scientist and/or MD).

- Research summer students MAY be granted access to Electronic Medical Records (e.g., Soarian/Sunrise) or have access to PHI of patients or research subjects providing they pass a research specific privacy training course.
- Research Students doing any recruiting or consenting, even remotely, will need to be added to the REB approved protocol
- Remote onboarding and network access to UHT email/folders/intranet will be arranged
- Research Students and their supervisors are required to complete the standard onboarding packages.

PROCESS:

Steps 2-4 (creating an online profile, PI completing all paperwork) must be completed and submitted at least 3 weeks prior to the student's start date. Any delays in paperwork (sending it late, incorrectly completing forms, will result in a delayed start date if not received in time).

- 1. All students must complete an online profile prior to registering through the SRS system. See the "Getting Started" pdf.
- 2. Once PI forms are completed, send these to the KRSS Coordinator (<u>KRSS.Program@unityhealth.to</u>) along with the student's CV/Resume and proof of registration (i.e. acceptance letter, class schedule) as an undergraduate student or medical student. (*Please note that one reference check form will be required and is included in the PI Forms*)
- 3. Investigator (or designate) will ask the **candidate to upload their resume** to the UHT resume bank. Please have your candidate submit their resume to the UHT Resume Bank: <u>Candidate Space (unityhealth.to)</u>. The candidate must register for an account by clicking **Login** (in the top right) and **Register** in order to upload their resume and submit the application.

- 4. The KRSS Coordinator will verify that all information is complete and will forward to HR for processing.
- 5. HR will then draft and send the PI an Offer Letter for review and approval. Please keep an eye out from HR for the draft offer letter.
- 6. **Payroll Entry:** Please note that employee's hours will be inputted into the system according to the info provided in the HR Action Form (page 13). If this info is to change in future, notify KRSS.Program@unityhealth.to so that your employee is not overpaid/underpaid. It is the responsibility of the PI's department to communicate this to the ORA.
- 7. For returning students or extension of existing students: Please contact KRSS.Program@unityhealth.to and ResearchEmployment@unityhealth.to well in advance of expiry to ensure that access is not lost



Keenan Research Summer Student Assignment Form for Pls/Managers

Please complete all fields. It is the Investigator's responsibility to ensure adequate training and supervision are available to support the Keenan Research Summer Student's work.

Keenan Research Summer Student Name:	
PI Name:	Phone Ext:
Program Manager: (If applicable)	Phone Ext:
Start Date:	End Date:
Please describe why you are engaging this Keenan Research Summer Streceive from the experience:	tudent and what they will
Please describe the specific duties of the Keenan Research Summer Stu	dent:
Please describe all relevant skills or qualifications:	
Will the student be working with biological material?	☐ Yes ☐ No
Is there any additional training beyond the standard training required? - SRS Privacy training	
Which days and what hours will the Keenan Research Summer Student	be expected to work?



Please describe how the Keenan Research Summer Student will be supervised. Please describe how the Keenan Research Summer Student will be supervised. Please describe how the Keenan Research Summer Student will be supervised. Please describe how the Keenan Research Summer Student will be supervised. Please describe how the Keenan Research Summer Student will be supervised. Please describe how the Keenan Research Summer Student will be supervised. Please describe how the Keenan Research Summer Student will be supervised. Please describe how the Keenan Research Summer Student will be supervised. Please describe how the Keenan Research Summer Student will be supervised. Please describe how the Keenan Research Summer Student will be supervised. Please describe how the Keenan Research Summer Student will be supervised. Please describe how the Keenan Research Summer Student will be supervised.	lease	includ	e a		
Research Students doing any recruiting or consenting, even remotely, will need to be added to the REB approved protocol. If your student will be carrying out such tasks, have you informed or contacted the Research Ethics Board? https://research.unityhealth.to/staff-services/research-ethics/ Please be reminded that Research Students working on REB approved studies should complete TCPS2 Training and if applicable GCP training (found here: https://research.unityhealth.to/staff-services/research-education-training/		Yes		No	
Is the Keenan Research Summer Student a student?		Yes		No	-
If yes, what school and program are they enrolled in?					
Will the Keenan Research Summer Student be gaining academic credit?		Yes		No	



Keenan Research Summer Student Service Agreement

Please read carefully before signing.

Please check each box to acknowledge your understanding and agreement.

The s	The supervisor/PI agrees to:					
	Adhere to all responsibilities outlined in section 1.8 of the Research Volunteer and Visitor Policy (see Instructions – for Section 1.8).					
	Provide supervision, training, orientation, supervision and feedback to the Student specific to their work area/field.					
	Be accessible (via phone/email) to the student for input, direction and to share information.					
The H	eenan Research Summer Student agrees to:					
	Maintain a professional commitment to the Keenan Research Summer Student position					
	Seek direction from supervisor if Keenan Research Summer Student is unsure					
	Read and understand the workplace violence policy					
	☐ Not to exchange contact information – including address, phone numbers, email or social networking information – with patients, study subjects and/or their friends and family.					
	Complete the training and have understood it fully					
	Maintain confidentiality					
	Review the Research Volunteer and Visitor Policy and other relevant SMH policies within 30 days of start date					
All registered Keenan Research Summer Student at SMH have accepted the Keenan Research Summer Student role description outlined in the Keenan Research Summer Student Assignment Form for Pls/Managers and have agreed not to make any significant changes in their engagement without first informing the ORA.						
I understand and accept the terms of the foregoing Keenan Research Summer Student						
	PI/Manager (print) name: Keenan Research Summer Student (print) name:					



Accessing Patient Data for Research – Acknowledgment

Please carefully review and acknowledge your understanding of the following:

- The hospital is committed to respecting, protecting our patients', staff privacy, confidential
 corporate information and personal health information while balancing the need to foster an
 environment for academic learning and shared knowledge.
- Research personnel (including but not limited to research visitors, volunteers, KRSS students, post-doctoral fellows, graduate students and medical students here for research purposes) will not be permitted under any circumstances independent access to patients nor will they be able to participate in direct patient care.

Observing Patients on Site

 Research personnel are **NOT** allowed to observe or shadow in any hospital clinical environment.

Access to Patient Data through Electronic Systems (e.g., Soarian) & Patient Charts

- Research personnel may get VIEW only access to electronic medical records or charts providing
 it is required and justified for the research project they are working on and the following
 conditions are met:
 - 1. The research personnel has completed the Research Privacy training available in the Student Registration System (SRS)
 - The research personnel is working on an approved Research Ethics Board (REB) research study, which requires access to electronic medical records or charts stored by the hospital
 - 3. The research personnel has been added to the research team of the approved REB research study.
 - 4. The supervising researcher/PI ensures that the research personnel is trained appropriately on patient privacy and the electronic system before accessing electronic medical records or patient charts.
- Depending on circumstances further conditions may be imposed.
- Research personnel <u>should never</u> access electronic medical records using someone else's account.
- Once all of the above requirements have been met, the supervising researcher/PI can submit a request to allow research personnel under their supervision to gain access to electronic medical records
 - o SMH: A ShopIT request (electronic medical record: Soarian/Sovera).
 - St. Josephs: email sent request to <u>Cordelia.Cooper@unityhealth.to</u> (electronic medical record: Sunrise/Sovera)

Requirements for Research Personnel and their Supervising Researcher/PI

- You (research personnel and supervising researcher/PI) are responsible for all of the following:
- Ensure adequate training and certification to conduct the activities in accordance with the approved research protocol



- Understand and follow appropriate hospital policies and procedures
- Report any breaches of privacy to the Privacy Office: privacy@unityhealth.to and Research Ethics Board: researchethics@smh.ca
- Provide clearly defined activities consistent with the research protocol so that the research personnel only access patient information for the purpose described in the approved study protocol.
- Ensure oversight/supervision of research personnel with access to medical records is consistent with the approved research protocol
- Ensure the REB is informed of all study changes, including personnel changes or additions, for research projects
- ➤ Ensure all patient health information transcribed/abstracted remains on the hospital's secure network and that appropriate controls are in place if data is being transferred to an offsite sponsor/collaborator etc. (e.g., contract, described in research ethics application etc.).
- Understand that research personnel accounts that access patient records may be audited at any time (as per usual practice).
- And that You (research personnel and supervising researcher/PI) DO NOT do any of the following:
 - > Share, lend, or allow others to use your access log in to medical records or patient systems
 - Share, remove, or discuss patient health information outside of the approved research protocol
 - Violate any privacy or confidentiality guidelines and/or legislation, including the Personal Health Information Protection Act (PHIPA) of Ontario
 - ➤ Do not access or use any shared system (e.g. ConnectingOntario, PRO, OLIS, eCHN, RM&R, HDIRS, IAR) for research purposes
 - Violate any research ethics guidelines
 - Engage in any activities beyond those specified in the approved research protocol or beyond the researcher personnel's role at any time
 - Engage in any research activities prior to receiving REB and other required institutional approvals
 - Engage in any research activities prior to completing all required research training
 - Allow patient health information or data transcribed/abstracted for research purposes to leave the hospital or to be stored anywhere other than on the hospital's secure network
 - Save personal health information or confidential information on a personal device (must be saved on a network drive)
 - Email personal health information to a non-Unity Health email address.
 - NOT print any personal health information at home



Questions for PI/Manager:

W	/ill the research personnel have access to personal health information? a.
b.	If yes, what personal health information will the research personnel have access to?
C.	If yes, where will the personal health information be stored? (e.g., network / shared folder, electronic medical record)?
:	 Will the research personnel have access to electronic medical records (Soarian/Sovera at SMH/Sunrise/Sovera at St. Joseph's)? a.
	b. If yes, how will you (PI) ensure that research personnel only access records that they should?
:	3. What training and oversight will you (PI) provide the research personnel in the care and handling of personal health information to ensure there are no privacy breaches?



4. How will you ensure that PHI does not	leave the site?			
flow and ensure that the data is being network. When accessing patient reco	overseeing the student(s) review the exact data g abstracted and stored and does not leave the ords remotely through Citrix/VPN, research s stored saved and stored on the network and see or emailed to personal emails.)			
5. Will research personnel email PHI to an	ny non-Unity Health Email addresses?			
a.				
b. If yes, please describe the cond	litions which will ensure that the data will be kept safe.			
I acknowledge, understand and accept the terms regarding access to hospital patients and their data which is limited to a specific research purpose. I understand that I may be audited by the Hospital at any time.				
Date:	Date:			
PI/Manager (print) name:	Research Personnel (print) name:			

Research Personnel Signature:

PI/Manager Signature:



Employment Reference Form: Non-Clinical Positions

Competition Number	Click or tap here to enter text. Reference Name		Click or tap here to enter text.
Position Title	Click or tap here to enter text.	Reference Title	Click or tap here to enter text.
Candidate Name	Click or tap here to enter text.	Company	Click or tap here to enter text.
Date completed	Click or tap here to enter text.	Contact number	Click or tap here to enter text.
E		Email	Click or tap here to enter text.
Reference Relationship to the candidate			Click or tap here to enter text.

Please confirm the following information for the candidate:

Candidate Title	Click or tap here to enter text.
Candidate Responsibilities	Click or tap here to enter text.
How long have you know the	Click or tap here to enter text.
candidate?	

Please rate the candidate in the following areas from 1 to 5:

1 = Unacceptable 3 = Met Expectations 5 = Exceeded Expectations

1 - Onacceptable 5 - Wet Expectations 5 - Exceeded Expectations			
Attendance and Punctuality	Click or tap here to enter text.		
Able to work well with others – demonstrated teamwork	Click or tap here to enter text.		
Able to handle stressful situations and manage conflict	Click or tap here to enter text.		
Able to meet timelines including managing multiple deadline	Click or tap here to enter text.		
simultaneously			
Ability to work independently without supervision	Click or tap here to enter text.		
Written and verbal communication	Click or tap here to enter text.		
Overall performance	Click or tap here to enter text.		

What would you consider the candidate's strengths? Why?

Click or tap here to enter text.

What would be the candidate's areas of opportunity where support will be needed? Why?

Click or tap here to enter text.



Employment Reference Form: Non-Clinical Positions

Click or tap here to enter text.	
Why did the candidate leave the organization?	
Click or tap here to enter text.	
Would you hire this candidate? Why?	
Click or tap here to enter text.	
Are there any other comments you would like to share ab	out this candidate that would help in the hiring decisio
Click or tap here to enter text.	



Hire Known Candidate for On-Site Summer Students 2024 + Conflict of Interest Disclosure Form

Manager Information			
PI Name		Phone Ext:	
Program Manager		Phone Ext:	
(If applicable)			
Candidate Information			
Name of Candidate:			
Assignment/Payroll Infor	mation		
Position:		Research Student Research - Students	
Start Date:			
(Important – All paperwo	ork must be		
sent to			
KRSS.Program@unityhea	alth.to 3		
weeks in advance of the	<mark>start</mark>		
date. Must be a Monday,	unless a		
statutory holiday, in which	ch case it		
must be Tuesday)			
End Date: (If applicable.	Casual		
assignments must be ten	nporary)		
Pay Scale: \$16.55 – \$19.4	13		
Will the Student be worl			
or part time hours? If ful			
hours will be automatica populated	ally		
Work Type: (formerly Joh	o Status)	Casual – Co-op Students are casual employees but usually work FT	
If Part-Time, identify how		,	
days per week and emai	•		
KRSS.Program@unityhea			
inform for payroll entry			
Reason for Hire:		New Position	
Payroll Information:			
(Please refer to the attached		GHR Organization Unit Name: Research - Students	
spreadsheet Research Org Units)		Organization Unit Number: 87	
Payroll Time Entry Perso	n: KRSS Coor	dinator	

	Company	Accounting Unit	t	Activity Number	Percentage (%)
1					
2					
3					
4					
	OTE: All Pl's proval.*	who own any of	the above mentio	ned cost centre(s) must be	e copied in the request for RFA
Co	onflict of Inte	erest Disclosure fo	or Hiring this Cand	idate:	
Is	the candidat	e a family membe	er of the		
su	pervisor (or	the individual res	oonsible for the		
de	ecision to eng	gage this incumbe	nt)?		
Is	the candidat	e affiliated with a	n organization		
in	which the su	pervisor or the su	upervisor's		
fa	mily member	r has a financial o	r ownership		
in	terest?				
(F	amily Memb	er includes a spou	ise, domestic parti	ner, child, parent, sibling, g	randparent, grandchild or other close
re	lation. For th	e purpose of this	policy (i.e., Resear	ch Conflicts of Interest), a	family relationship includes biological
re	lationships, a	adoptive relations	hips, relationships	created through marriage	and other relationships in which care-
gi	ving or deper	ndency exists. Plea	ase note that if yo	u check "Yes", before this I	nire can be processed this information
w	ill be forward	led to the Office o	of Research Admin	istration for review under	the Research Conflicts of Interest Policy)
Cr	iminal Check	(
Ha	ave you advis	sed the candidate	that a Criminal Ch	eck will be required before	e their start
da	ite? Consent	will be obtained t	through email fron	n HR in advance of issuing	the
\vdash	contract letter.				
Unity Health Toronto Conducts Criminal Record Checks for all external candidates. We ask that you advise the					
candidate that a Criminal Check will be required before their start date. Candidates may not begin working at Unity					
pr	prior to submitting a Criminal Check which they will complete via email in advance of their first day at work.				
For purposes of the Criminal Record Check, we need the following information from the Candidate:					
_	ndidate lega				
Ca	ndidate lega	l last name			
	_		ĺ		

Accounting Unit & Activity Number(s):