

CAE LearningSpace Confidentiality and Consent Agreement

User Contract

The Centre for Healthcare Simulation and research (CHSR) incorporates CAE Learning Space (CAELS) to facilitate simulation-based experience (SBE) and record skills assessment as part of the delivery of healthcare programs at the IAHS. Simulations and skills check may require task trainers, mannequins and/or role play by students, volunteers, standardized patients, staff or faculty, herein after referred to as Participant.

As a Participant, in the CHSR, I agree to act professionally and responsibly, treating equipment, standardized patients, staff, faculty, and peers with respect. I will treat the SBE as if it were real, act with a genuine desire to learn and aid in the process and suspend my disbelief of the SBE even when it is difficult to do so.

Confidentiality Agreement

To preserve the education value, integrity, and safety of the learning environment, I _____ agree to maintain strict confidentiality about the proceedings of the simulation session, details of training scenarios, debriefing sessions, and the performance of all participants. Except on the CAELS platform, I will not view, discuss, share, record or disclose in any manner, including on social media, any video clips or information pertaining to the session, including after my convocation or any early exit from my program.

Mohawk College Student Participants understand that any breach in confidentiality may be considered misconduct and may be dealt with under the Student Behaviour Policy, and access to the centre being revoked and/or removal from the academic program, as applicable.

External Participants understand that any breach of confidentiality or misconduct could result in access to the centre being revoked.

I agree to act with professional behaviour at all times and understand that any misconduct contradictory to the statements above will be managed according to the policies set forth by the CHSR and Mohawk College.

The staff and participating instructors in the CHSR and CAELS will maintain and hold all confidential information regarding the performance of all student learners.

By signing below, you acknowledge having read and understood this agreement.

DATE:

(dd/mm/yyyy)

PER:

Printed Name

Signature



**CAE LearningSpace
Photo/Video Release Form**

Video recording is often necessary to meet the learning objectives of simulation sessions.

I _____, authorize Mohawk College, in perpetuity, the use of photography and video recording for purposes including but not limited to debriefing, training staff and faculty, educational presentations and quality assurance.

Videos recorded for skills assessments or evaluations are only to be used for quality improvements and academic appeals purposes. All skills assessment videos will be deleted after two (2) calendar years following recording date.

In signing this form, I acknowledge that I will receive no remuneration for the above.

DATE:

(dd/mm/yyyy)

PER:

Printed Name

Signature