

Emergency Medical Services Department

MISSION

"To improve the health and safety of our community by providing professional Emergency Medical Services providers at the EMT and Paramedic levels."

VISION

"Building capacity in our communities by empowering individuals through innovative, quality prehospital education."

PHILOSOPHY

The Emergency Medical Services Department staff and faculty believe it is our job to walk beside the student on their journey to becoming a member of the Emergency Medical Services profession. Each student will be provided with the knowledge and resources needed to be successful. The programs are developed with the adult learner in mind so activities and assignments are developed using active and creative learning strategies. The faculty act as Professional Guides but ultimately learning is the responsibility of the learner, the student. Your success is our focus and every interaction between staff, faculty, and students is intended to motivate and inspire you to learn.

CoAEMSP GOAL STATEMENT

"To prepare Paramedics who are competent in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains to enter the profession."

ASSOCIATE OF APPLIED SCIENCE DEGREE IN PARAMEDICINE

DESCRIPTION

The course is being conducted by Mohave Community College and awarded a certificate of proficiency. Students wishing to complete an associate's degree in Paramedicine can continue their education after the certificate is completed.

OCCUPATIONAL INFORMATION

- A. Graduates who successfully complete the EMT or Paramedic program are eligible to test for certification as an EMT or Paramedic. The graduate is educated as a generalist who delivers health care to patients and family groups and has competencies related to the art and science of emergency pre-hospital care. The EMT/Paramedic may be employed in a variety of community-based health care settings. EMS providers function within the legal scope of practice and use professional standards of care when caring for patients and families across the life span.
- B. According to the Bureau of Labor Statistics, "Employment of EMTs and paramedics is projected to grow 7% from 2021 to 2031, about average for all occupations. About 20,000 openings for EMTs and Paramedics are projected each year on average."

C. ELIGIBILITY FOR CERTIFICATION

Students completing graduation requirements for the EMT and Paramedic programs are eligible to apply for certification as an EMT/Paramedic. Applicants for certification in Arizona must provide evidence of citizenship or nationality. Certification fees and requirements are determined by and are the sole responsibility of the AZ Department of Health Services - Bureau of EMS (AZDHS-BEMS) and the National Registry of Emergency Medical Technicians. For all questions about eligibility for certification and the documents required, contact the NREMT www.nremt.org or AZDHS-BEMS <https://www.azdhs.gov/preparedness/emergency-medical-services-trauma-system/index.php>

D. FELONY BAR

The Department shall not certify an EMCT if the applicant:

1. Is currently:

- a. Incarcerated for a criminal conviction,
- b. On parole for a criminal conviction,
- c. On supervised release for a criminal conviction, or
- d. On probation for a criminal conviction;

2. Within 10 years before the date of filing an application for certification required by this Article, has been convicted of any of the following crimes, or any similarly defined crimes in this state or in any other state or jurisdiction, unless the conviction has been absolutely discharged, expunged, or vacated:

- a. 1st or 2nd degree murder;
- b. Attempted 1st or 2nd degree murder;
- c. Sexual assault;
- d. Attempted sexual assault;
- e. Sexual abuse of a minor;
- f. Attempted sexual abuse of a minor;
- g. Sexual exploitation of a minor;
- h. Attempted sexual exploitation of a minor;
- i. Commercial sexual exploitation of a minor;
- j. Attempted commercial sexual exploitation of a minor;
- k. Molestation of a child;
- l. Attempted molestation of a child; or
- m. A dangerous crime against children as defined in A.R.S. § 13-604.01 13-705;

3. Within five years before the date of filing an application for certification required by this Article, has been convicted of a misdemeanor involving moral turpitude or a felony in this state or any other state or jurisdiction, other than a misdemeanor involving moral turpitude or a felony listed in subsection (A)(2), unless the conviction has been absolutely discharged, expunged, or vacated;

ACCREDITATION

All EMS programs are accredited by the Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions (CoAEMSP) 8301 Lakeview Parkway, Suite 111-312, Rowlett, TX 75088 (214) 703-8445

AND

Commission on Accreditation of Allied Health Education Programs (CAAHEP) 9335 - 113th St. N, #7709, Seminole, FL 33775 (727) 210-2350

State approval for the EMS programs is provided by the Arizona Department of Health Services, Bureau of EMS (AZDHS-BEMS) 400 W Congress St #100, Tucson, AZ 85701 (520) 628-6985

DESCRIPTION OF THE PROFESSION - EMT

Emergency Medical Technician

The primary focus of the Emergency Medical Technician is to provide basic emergency medical care and transportation for critical and emergent patients who access the emergency medical system. This individual possesses the basic knowledge and skills necessary to provide patient care and transportation. Emergency Medical Technicians function as part of a comprehensive EMS response, under medical oversight. Emergency Medical Technicians perform interventions with the basic equipment typically found on an ambulance. The Emergency Medical Technician is a link from the scene to the emergency health care system

DESCRIPTION OF THE PROFESSION - PARAMEDIC

Paramedic

The Paramedic is an allied health professional whose primary focus is to provide advanced emergency medical care for critical and emergent patients who access the emergency medical system. This individual possesses the complex knowledge and skills necessary to provide patient care and transportation. Paramedics function as part of a comprehensive EMS response, under medical oversight. Paramedics perform interventions with the basic and advanced equipment typically found on an ambulance. The Paramedic is a link from the scene into the health care system.

Paramedics recognize that they are an essential component of the continuum of care and serve as linkages among health resources. As an advocate for patients, paramedics seek to be proactive in affecting long-term health care by working in conjunction with other provider agencies, networks, and organizations. The emerging roles and responsibilities of the paramedic include public education, health promotion, and participation in injury and illness prevention programs.

Paramedics are responsible and accountable to medical direction, the public, and their peers. Paramedics recognize the importance of research and actively participate in the design, development, evaluation, and publication of research. Paramedics seek to take part in lifelong professional development, and peer evaluation, and assume an active role in professional and community organizations.

TERMINAL COMPETENCIES

Successful completion of all paramedic program terminal competencies is required in order for the student to receive "course completion" and be allowed to enter into the NREMT process. All of the following terminal competencies must be completed before the last day of the cohort.

All EMS core courses require a grade of B or better (80%) in order to continue in the program.

Core course terminal competencies are as follows:

1. Successful completion of all EMS core courses with a grade of 80% or better
2. Successful completion of all assigned unit exams utilizing a commercial testing product.
3. Successful completion of program comprehensive examination with a grade of 75% or better utilizing a commercial testing product. This exam will be given prior to the end of the final block. If the student does not receive 75% on the exam he or she must then submit a learning rx in order to qualify for retest. The student will receive a maximum of two (2) attempts at the final comprehensive examination.
4. Successful completion the following specialty certification courses as taught in the program:
 - a. Advanced Cardiac Life Support (ACLS) new provider
 - b. Pediatric Advanced Life Support (PALS) new provider
 - c. Pre-Hospital Trauma Life support (PHTLS) advanced provider
 - d. Advanced Medical Life support (AMLS) advanced provider
5. Successful completion of Paramedic Psychomotor Core Competencies (PPCP).
6. Successful completion of an NREMT Paramedic practical examination at the end of the final block. Portions of this exam will be practiced throughout the program, and a final mock exam will be conducted as part of the summative program evaluation.
7. Completion of **ALL** required clinical hours in each designated area with proper documentation of successful completion of hours. Clinical hours must be completed as designated per block for the student to be able to progress to the next block.
8. Completion of all required assessments in each category with proper documentation of successful completion of each assessment.
9. Completion of required skills in each category with proper documentation of successful completion of each skill.
10. Completion of a minimum of 240 clinical experience hours with proper documentation of successful completion of hours.
11. Completion of a minimum of 208 field experience hours with proper documentation of successful completing of hours.
12. Completion of a minimum of 120 capstone field internship with proper documentation of successful completion of hours.
13. Completion of a minimum of 30 team member assessments during field experience.

14. Completion of a minimum of 20 team leader assessments during capstone field internship. All 20 patients in the Capstone phase must be transported to a higher level of care.
15. Summarized affective evaluation will be completed for each student. With consistent affective evaluations being completed weekly and at the end of each block. Affective Domain competency is required to be successful in the cohort.
16. Must be rated as competent by Capstone preceptors. This will be done by having preceptors complete student evaluations in Platinum Planner for each Capstone shift. It is required that this evaluation be completed for each shift or the shift will not count and will be repeated.
17. Must be signed off as a competent entry-level Paramedic by program Medical Director to include didactic, psychomotor and affective domains. If the student does not meet competency in one domain (didactic, psychomotor or affective) they will not be signed off as competent and will have complete course failure. If the student has complete course failure they will be assigned a "D" grade.

PROGRAM STUDENT LEARNING OUTCOMES

By the end of the program the student will:

1. Provide holistic care that recognizes an individual's preferences, values, and needs and respects the client or designee as a full partner in providing compassionate, coordinated, age and culturally appropriate, safe, and effective care.
2. Demonstrate accountability for the delivery of standard-based prehospital care that is consistent with moral, altruistic, legal, ethical, regulatory, and humanistic principles.
3. Transform and influence behaviors of individuals and groups to promote, to establish and to achieve shared goals determined within their settings. EMTs/Paramedics will advance within their leadership abilities in collaborative inter-professional efforts and for implementing change.
4. Demonstrate an awareness of and responsiveness to the larger context of the health care system, and will demonstrate the ability to effectively call on microsystem resources to provide care that is of optimal quality and value.
5. Use information and technology to communicate, manage knowledge, mitigate error, and support decision-making.
6. Interact effectively with clients, families, and colleagues, fostering mutual respect and shared decision making, to enhance patient satisfaction and health outcomes.
7. Function effectively within prehospital and interdisciplinary teams, fostering open communication, mutual respect, shared decision making, team learning and development.
8. Minimize risk of harm to clients and providers through both system effectiveness and individual performance.

9. Use data to monitor the outcomes of care processes and use improvement methods to design and test changes to continuously improve the quality and safety of health care systems.
10. Integrate the best evidence available using prehospital expertise and the values and preferences of individuals, families and communities who are served by health care

ADVANCED PLACEMENT OPTIONS

Students who leave the MCC Paramedic program during the cohort, who are in good standing, and leave for personal or medical reasons are eligible for readmission within one (1) year of exit. The student must contact the Program Director for approval.

The MCC EMS department does not accept advanced placement credit or experiential learning for Paramedic program placement.

PROFESSIONAL CONDUCT

- A. The EMS faculty believes that standards of professional conduct are an inherent part of professional socialization and expects students enrolled in the EMS program to adhere to the standards.
- B. Students practice within the boundaries of the Arizona Department of Health Services - Bureau of EMS, the NAEMT Code of Ethics for EMS Practitioners, the guidelines of the MCC EMS Student Resource Guide, MCC Student Handbook, and the policies and regulations of the healthcare agency where they are assigned for clinical learning (EMS scope of practice AZ DHS <https://www.azdhs.gov/documents/director/administrative-counsel-rules/rules/rulemaking/emct-scope-of-practice/clean-copy-of-new-emct-scope-of-practice.pdf> code of ethics <https://www.naemt.org/about-ems/code-of-ethics>
- C. Unprofessional behavior including, but not limited to, academic dishonesty, angry outbursts, use of vulgar or obscene language in any educational setting or menacing/threatening behavior will result in disciplinary action up to and including dismissal from the program.
- D. Such behavior is inconsistent with professional standards and inappropriate for students aspiring to a career in emergency medical services.
- E. The Director, designee, and/or instructor will complete a Student Learning Contract describing the behavior and documenting the actions to be taken.
- F. If the student exhibits behavior inconsistent with the professional standards they will be placed on a Performance Improvement Plan (PIP). If they do not meet the expectations set in the PIP they will be removed from the program and receive a "D" grade.

Standards of Professional Conduct include:

- **Confidentiality:** Respects the privacy of clients and respects privileged information.
- **Accountability:** Is answerable for one's action; answers to self, the client, the profession and the institution.
- **Responsibility:** Executes duties associated with the EMT/Paramedic's particular role.
- **Agency's Policies and Procedures:** Reads and adheres to the agency policies and procedures.
- **Veracity:** Truthfulness; adherence to precision and honesty.
- **Punctuality and Promptness:** Is on time for all class, lab, and clinical assignments.
- **Dependability:** Is trustworthy and reliable.
- **Respect:** Treats others with consideration and courtesy. • **Professional Appearance:** Adheres to established dress code in all clinical and professional activities.
- **Ethical:** Adheres to the Code of Ethics for EMS Practitioners.
- **Legal:** Operates within the standards of care related to the student EMT/Paramedic role.
- **Safety:** Prevents or minimizes risks for physical, psychological, or emotional jeopardy, injury, or damage.
- **Civility:** All students in EMS programs are expected to contribute to a positive learning environment. EMS students are expected to be reflective, courteous, respectful, and empathetic to classmates, instructors, and college and clinical staff. Angry outbursts, disruptive behavior, and the use of abusive or derogatory language will not be tolerated and may result in removal from the course and/or program.

UNIFORM APPEARANCE CODE

While enrolled in the paramedic program during hospital and field rotation settings and in all educational areas including the classroom, students are expected to be properly attired and neatly groomed. Failure to maintain a professional appearance for patient care and as a representative of the MCC Paramedic Program will result in being asked to leave the clinical/field or classroom area resulting in an unexcused absence. The official uniform of the paramedic student will be that which is adopted by the faculty of the MCC Paramedic Program. Students will be required to follow the Uniform Appearance Code as follows.

Required uniform for clinical/field Experience:

- a. EMS pants.
 - b. Belt
 - c. Program issued polo shirt with Program Logo
 - d. Stethoscope
 - e. All-black, leather or synthetic closed toe, low-heeled shoes are required and must be clean and polished with black laces. Shoes must have a closed heel. Boots are recommended for ankle support. Shoes will be properly secured, tied, zipped, and/or laced. Tennis shoes (black) are allowed in the ER and OR setting due to the amount of time spent walking.
2. Appropriate attire for the classroom and lab is the program polo or t-shirt, EMS pants, black boots/tennis shoes.
3. Appropriate weather outerwear for clinical sites
 - a. Knit caps are allowed as long as they do not show an agency affiliation. Program jackets are available for purchase at the student's expense. Department or personal jackets that interfere with designation as a student are not allowed
4. Student ID badge
5. Undershirts must be plain white or navy blue. Undershirt must not contain any logo of any kind.
6. Uniforms must be neat, clean and wrinkle-free.
7. Undergarments and/or cleavage should not show when leaning or bending over.
8. Hair will be off the collar in back (men & women) plain clasp or hair clips only.
9. Hair must be kept out of the face.
 - a. Hair shall be of a color occurring among natural hair colors. In other words, no bright, basic colors (blue, green, etc.)
10. Men will be clean shaven or beards & mustaches neatly trimmed.
11. No perfume or cologne.
12. Fingernails will be trimmed (no acrylic nails).
13. No jewelry or accessories (this includes sunglasses) to clinical, except watch & engagement or wedding rings.
14. Only ONE set of post earrings allowed for pierced ears. Earrings cannot dangle below earlobe.

15. NO visible body piercings allowed in clinical/field setting. This includes tongue piercing. If your tongue is already pierced, you must purchase a clear ball to wear during all clinical and field rotations. If your tongue is not pierced as of this moment, DO NOT pierce it while you are in this program.
16. Students must arrive at clinical rotations clean, free of body odor or offensive breath.
17. All visible tattoos will be covered in the clinical/field setting.

PROFESSIONAL PRESENCE

The following guidelines are mandatory for students to remain in compliance with the dress code:

1. While dressed in the uniform and in the public view; whether on a clinical rotation, in school, before or after class or before or after a clinical/field rotation; all policies regarding the wearing of the uniform will be followed.
2. The uniform is not to be worn in public venues, other than in an official capacity.
3. At no time should the uniform be worn where alcohol is served or consumed, other than while on a call during a clinical rotation.
4. The clinical uniform is highly recognizable in all settings. At all times while in the public view:
 - a. Students are to wear the uniform with the shirt properly buttoned and tucked in.
 - b. Boots are to be properly laced or zipped.
 - c. ID badge must be worn at all times on the upper right shoulder area of the uniform with the picture facing forward.
5. Students may wear the uniform to restaurants for meals while in class or on field rotations permitted they show professionalism and represent the program and EMS at the highest level.
6. Students are expected to present themselves in a professional manner at all times while enrolled in the EMS program
7. In all cases, the student must comply with the professional appearance policy of the clinical agency.
8. Students must comply with the professional dress code guidelines at all times. A student may be dismissed from the program and receive a failing grade in the course based on the inability to place the student in a clinical facility due to noncompliance with the professional appearance policies

Student Expectation in Reporting Unprofessional Conduct

A. During the course of study in an EMS program, a student may observe behaviors in others that appear to violate the standards of academic and/or professional integrity or actions that have a potential to harm another individual. Each student has the responsibility to report these behaviors or actions to the instructor and/or Director of EMS at the college.

Professional Boundaries

A. Students enrolled in a program of study in EMS must learn the importance of establishing and maintaining professional boundaries. In a student role, professional boundaries exist between the student and the instructor and between the student and the client. Students unclear of proper behavior or of an appropriate response to a client should consult the instructor for guidance.

B. Student and Faculty:

1. Faculty and students will maintain a professional relationship.
2. Students will address faculty and administration with proper titles and last name (Professor Smith, Dr. Smith, Director Smith, Mr./Ms./Mx. Smith, etc.).
3. Students should not expect an instructor to act as personal counselor or therapist. Students should seek assistance from academic advisors and counselors at the college.
4. Students should not ask or expect the instructor to join an individual, group, or class in any social situations while the course is in progress.
5. Students should not offer the instructor gifts or money as gratitude for instruction.

Instructors may accept cards or notes when students wish to thank the instructor

C. Student and Client:

1. Students will maintain a professional provider-patient relationship.
2. Professional Boundaries “are the spaces between the provider’s power and the patient’s vulnerability.” Students providing care must strive to inspire the confidence of patients, not create dependencies.
3. Students must treat all patients, as well as other health care providers, professionally. Patients can expect those providing care to act in their best interests and respect their dignity. The student should abstain from obtaining personal gain at the patient’s expense and refrain from inappropriate involvement in the patient’s personal relationships.
4. Boundary violations can result when there is confusion between the needs of the student and those of the patient. Such violations are characterized by excessive personal disclosure by the student, secrecy or even a reversal of roles. Boundary violations can cause delayed distress for the patient, which may not be recognized or felt by the patient until harmful consequences occur.

Channels of Communication

- A. There is an expectation of mutual respect between faculty and students. If an issue should arise, the student schedules a meeting to discuss the issue with the faculty member. Issues are often resolved by direct communication between the faculty member and the student.

B. Students are required to follow chain of command and take all questions and concerns directly to their assigned Faculty. If there is an issue that remains unresolved after speaking with the Faculty, students may escalate their concern to the appropriate Program Manager. If the issue still remains unresolved, students may escalate to the Director of EMS Programs.

General information

A. Academic advisement is available at each campus.

B. The EMS courses are sequential and the successful completion of each course is a prerequisite for progression to the next block.

C. Students who score below 75% on tests and high stakes exam will be required to spend time with a success coach. Success coaches are provided by MCC and the student will have to provide documentation to their instructor that the time was completed to be allowed to continue in the block.

D. Students who are not meeting program standards in the didactic, psychomotor or affective domains, to include proper documentation, will be placed on a Performance Improvement Plan (PIP). The student will be given ample opportunity to meet the requirements set forth in the PIP, however if they are not successful in doing so, they will be removed from the program and receive a "D" grade.

Student Representation

A. Students are provided opportunities to offer input on decisions including admission standards, curriculum, student services, and the teaching/learning process.

B. Students are invited to become active in student groups, associations and organizations, both on campus and in the community.

C. The following list includes a sample of ways that students can become involved in governance: a. Complete End of Course, End of Program, Student Forum, and Alumni surveys.

D. Provide honest and fair feedback when asked to complete instructor and course evaluations.

E. Volunteer for committee participation by serving on the committees available at the college. Examples of these committees could include but are not limited to: Curriculum, Community Advisory, Student Conduct and/or Student Affairs Committees.

F. Provide input when your peers are representing your issues at Advisory committee meetings and student forums.

Mobile Devices

Mobile devices can be a valuable tool for healthcare education when used appropriately. The following guidelines apply:

1. Professional behavior and proper technology etiquette should be observed at all times when using cell phones, iPads, iPods, mobile devices, smart watches, laptops or other electronic devices.
2. These may be used only when authorized by faculty and for clinical activities, not personal use.
3. Cell phones and all mobile devices must be on “silent” mode and turned into the designated area of the classroom during class, lab, and simulations.
4. Cell phones and all mobile devices must be turned off and turned into the designated area of the classroom or testing center during all exams.
5. Under no circumstances should a student have a cell phone or mobile device on the unit during clinical rotations. • A verbal warning will be given for the first violation of using the mobile device for socializing during clinical time.
 - A second violation may result in removal from the clinical setting which results in a missed clinical day.
6. Be respectful to the client at all times and ensure that your entire attention is focused on the client when you are in the client’s room.
7. You must protect the confidentiality of patient information at all times in accordance with Health Insurance Portability and Accountability Act (HIPAA). Students may not take any photographs of clients or client records, nor print or make copies of client records.
8. Students who violate patient privacy with the mobile device will be subject to HIPAA infractions of the clinical agency and may be subject to disciplinary action up to removal from the program.
9. For additional information on how to use social media without professional or personal repercussions, visit the [MCC Student Handbook](#).

Attendance Guidelines

1. Students must be registered for the class in order to attend.
2. It is the responsibility of the student to notify their Advisor and assigned Faculty if they wish to drop or withdraw from a course.
3. Students will be held to Mohave Community College policies and procedures related to attendance (see [MCC Student Handbook](#)).

4. Attendance requirements are determined by the State of Arizona. Students may not miss more than 16 hours of class time per block.
5. Students who do not meet the attendance requirements as outlined in the MCC Student Handbook and EMS Student Resource Guide will be unsuccessful in the course.
6. Students who fail to attend the first scheduled class meeting, or who fail to contact the instructor regarding absence before the first scheduled class meeting will be dropped.
7. Students who do not attend class for two (2) consecutive weeks can be administratively withdrawn (WR1).
8. EMS courses prepare students for safe client care and faculty expect students to attend each class, laboratory, and clinical session to develop the theoretical and practice components of the professional EMS role. It is the responsibility of the student to notify the instructor prior to absence or anticipated late arrival.
9. Laboratory and clinical hours are difficult to make up and students must not expect make-up time to be available. When an absence results in the inability of the student to develop and demonstrate clinical practice objectives and meet the required hours of the course necessary for credit, the student will not receive a passing grade in the course.

In the event an absence is necessary due to serious illness of the student or family member, the absence policy of the EMS program includes but is not limited to:

a. Theory/didactic sections: Students are expected to attend all classes necessary to meet competencies of the course. If an absence occurs the student is responsible to obtain class notes and assignments.

- Students may not arrive late or leave early as these behaviors disrupt the learning environment
- A faculty member has the right to deny entrance if a student is late.
- Students arriving late for an exam will be denied entrance. Arrangements must be made with the Faculty to reschedule the exam.

b. Laboratory / Clinical Sessions: Students must attend all laboratory and clinical sessions. Makeup time for skills taught in lab or practiced in clinical may not be possible. Students will be graded on successful demonstration of skills/procedures and are responsible for reviewing skills prior to care. • Any missed lab, simulation, or clinical shift must be made up.

- If there is no availability to make up missed time before the end of the term and the student does not meet the required hours for the course, the student will not receive a passing grade for the course and will not progress to the next block.
- Students may be provided the option to withdraw.
- If a student is administratively withdrawn (WR1) it will count as a course failure
- Clinical shifts include pre-clinical laboratory practice, pre- and post-conferences, all scheduled clinical days, virtual clinical days, alternative clinical learning activities, and simulation.

13. All students must complete all clinical site orientation requirements prior to beginning clinical rotations

A. Any student who fails to complete the requirements or is absent on a day of orientation without prior instructor approval may not continue in the rotation.

14. Late arrival or leaving early from the clinical experience will result in a clinical miss, disciplinary action, and place the student at risk for failing to achieve the course competencies.

15. Any student who arrives more than 15 minutes late for a lab or clinical experience will be sent home and this will be considered an absence and count towards total hours that can be missed.

16. Clinical schedules will be available for students to register for required shifts through Platinum Planner. Students will have through the first week of term to schedule all required clinicals for the term.

A. Shifts and clinical sites are on a first-come, first-served basis.

B. Initial access to Platinum Planner will be granted once compliance of all required clinical documentation has been verified through PreCheck.

C. Students who do not register for their required shifts by the deadline will be assigned their clinical rotation

17. In case of serious illness or emergency situations, a student may find an absence unavoidable. When an absence occurs, the student must notify the Clinical Coordinator in advance of the clinical hours. Any absence can jeopardize successful achievement of course competencies.

18. Due to the competitive nature of clinical placements, the EMS program does not guarantee “make-up” clinical hours.

Lab and Offsite Clinical Expectations

1. Grades are Pass/Fail. Students are required to pass the lab and offsite clinical portions of the block in order to progress to the next block.
2. Students are required to arrive to the lab and offsite clinical site on time and be prepared to provide safe, quality care.
3. Students are required to be dressed in their proper uniform for all lab and offsite clinical shifts.
4. Students are required to bring their Skills Check-Off List to each clinical shift.
5. If a student is unable to keep a lab appointment, they must notify the Instructor and Clinical Skills Faculty as soon as possible.

6. All clinical and field time must be completed per block as outlined in the Required Clinical and Field Hour Breakdown Per Block form found in CANVAS. Failure to complete required hours will constitute failure of the block and the student will not progress to the next block.
7. Students are **required** to spend 24 hours of pediatric time at Flagstaff Medical Center. These two - 12 hour shifts will be scheduled for the student by the EMS department. Students will have a hotel room provided by MCC. Failure to complete these hours will constitute failure of the block and the student will not progress to the next block.
8. Students are permitted to do all of their field and capstone time at their own agency, however the student may **never** be substituted for staff and must always be the 3rd person on the unit.
9. Students must submit any completed forms, evaluations and assignments from their clinical shift to their Clinical Coordinator by assigned due date. If the shift is submitted late, it will be rejected in Platinum Planner and will not count towards course requirements.
10. Students will have 12 hours from the end of the clinical or field shift to complete and submit all documentation.

Skills Check-Offs

1. Before a skill can be performed in the offsite clinical setting the student must successfully demonstrate competency in the lab environment.

General Guidelines for all students administering medications

All Students must follow the principles of safe medication administration.

C. Adhere to the clinical agency's policies and procedures for medication administration.

D. Demonstrate competency in calculating medication dosages prior to administering medications.

- Students unable to calculate accurate doses may be referred to the lab for practice or receive clinical warning/probation related to unsafe clinical practice

PROFESSIONAL CONDUCT

- A. Unprofessional behavior including, but not limited to, academic dishonesty, angry outbursts, use of vulgar or obscene language in any educational setting or menacing/threatening behavior will result in disciplinary action up to and including dismissal from the program
- B. Such behavior is inconsistent with professional standards and inappropriate for students aspiring to a career in emergency medical services.
- C. The Director, designee, and/or instructor will complete a Student Counseling Form describing the behavior and documenting the actions to be taken

Standards of Professional Conduct include:

- Confidentiality: Respects the privacy of clients and respects privileged information.
- Accountability: Is answerable for one's action; answers to self, the client, the profession and the institution.
- Responsibility: Executes duties associated with the EMT/Paramedic's particular role.
- Agency's Policies and Procedures: Reads and adheres to the agency policies and procedures.
- Veracity: Truthfulness; adherence to precision and honesty.
- Punctuality and Promptness: Is on time for all class, lab, and clinical assignments.
- Dependability: Is trustworthy and reliable.
- Respect: Treats others with consideration and courtesy. • Professional Appearance: Adheres to established dress code in all clinical and professional activities.
- Ethical: Adheres to the Code of Ethics for EMTs with Interpretive Statements establishing the ethical standard for the emergency medical services profession.
- Legal: Operates within the standards of care related to the EMT/Paramedic student role.
- Safety: Prevents or minimizes risks for physical, psychological, or emotional jeopardy, injury, or damage.
- Civility: All students in the EMS programs are expected to contribute to a positive learning environment. EMS students are expected to be reflective, courteous, respectful, and empathetic to classmates, instructors, and college and clinical staff. Angry outbursts, disruptive behavior, and the use of abusive or derogatory language will not be tolerated and may result in removal from the course and/or program.

PROGRESSION AND RETENTION IN THE PARAMEDIC PROGRAM

- A. To progress in a Paramedic program a student must:
 1. Achieve a minimum overall course grade of 80%.
 2. Obtain an overall satisfactory rating on lab and clinical experiences.
 3. Meet all course requirements as described in the course syllabus.
- B. EMS faculty will work individually with students to provide remediation in order to encourage student success and retention in the program.

FINAL EXAM POLICY

The final comprehensive cognitive exam may only be taken twice. The student must obtain a 75% for EMT and 80% for Paramedic to be considered to have successfully passed the final exam.

PSYCHOMOTOR SKILLS EXAM POLICY

The final psychomotor skills exam will be completed on or after the last day of the course. The student must not fail more than 3 (three) skills during the psychomotor exam to be eligible to retest the skills that were failed on the same day. If the student fails 4 (four) or more skills it will be considered a total exam failure resulting ultimately in total course failure. If a second attempt at a skill is failed, the failure will result in a total course failure.

DEFERRING A TERM

- A. A student must contact the EMS Programs Director and let them know their intent to defer before the end of add/drop week for that block.
- B. The maximum amount of time a student may be out of the program is not to exceed one year or two semesters. If a student sits out more than two traditional semesters or one year, the student must apply as a new student, meet the current admission criteria and repeat all relevant paramedic courses including lab and offsite clinical activities.

DISMISSAL FROM PROGRAM

- A. The inability to place the student in a clinical facility will result in a clinical and course failure.
- B. Any student who violates the Platinum Ed Terms, Conditions or Copyright Theft Policy and are banned by Platinum Ed will be removed from the EMS program immediately. MCC has no ability to reinstate a student who is banned by Platinum Ed and there is no way for a student to take secured, high stakes exams, schedule clinical or ride time, or document any of the above without access to the Platinum Ed platform.
- C. Students who are dismissed from any EMS program should meet with their advisor to discuss available options.
- D. If a student wishes to continue pursuing a career in EMS, they may complete a request to be reviewed by a committee for consideration and recommendation to continue.

APPEALS PROCESS

- A. A student wishing to continue in the EMS programs may request to do so through their advisor.
- B. The committee who reviews the appeal will make an individualized recommendation to the student as to their best path to success based on their progress in the program and options available to the student.
 - 1. The committee can consist of EMS faculty and/or staff, advisors, student success coaches and financial aid.

The decision of the committee is final and there are no escalations

- 2. Factors which may be considered for readmission include, but are not limited to, final EMS course grades, benchmark scores, exam scores, and clinical evaluations.
- 3. The committee may specify additional required or recommended criteria for readmission. Criteria may include completion of academic courses, proof of work experience, remediation, counseling, or other activities to promote success of the student.
- 4. The Director of EMS Programs and the EMS Leadership team reserve the right to deny a request for readmission if the student was dismissed for issues relating to academic integrity, unsafe patient care, inappropriate conduct, or dismissal from a college or clinical facility.

No student is guaranteed readmission

- C. All readmissions are subject to space availability and approval of the Director of EMS Programs.

HEALTH AND SAFETY REQUIREMENTS

- A. All students entering EMS courses must meet all Health and Safety requirements to maintain enrollment in the program.
- B. Students who do not meet all health and safety requirements by the required date will not be approved to schedule their clinical rotations in Platinum Planner when clinical registration opens. Students who are not compliant by the first week of the term are unable to schedule clinicals, which impacts their ability to pass the clinical component of the course, resulting in a course failure.
- C. Students unable or unwilling to provide documentation of compliance with the Health and Safety Requirements will not be registered or allowed to continue in EMS courses.
- D. A physician note or other documentation will not negate the need to complete all health and safety documentation requirements due to the need to protect patient safety.
- E. Immunization variance is available due to religious or medical reasons. The Clinical Skills Program Manager must be informed of the need for an immunization variance prior to the student's acceptance into the program. Every attempt will be made to place the student in clinical rotations to meet the competencies of the course; however, if a clinical placement cannot be obtained the student may be given an incomplete, may not move forward with his/her cohort, and, in some circumstances, may not be able to complete the program of study.
- F. In all instances, a confirmation of Tuberculosis (TB) status is required, and verification of immune status is required by proof of titers for all required elements.
- G. For a medical variance, appropriate documentation from a licensed health care provider is required. Some facilities require an influenza vaccination and a waiver is not accepted. In those instances, a student without required immunization(s) will not be able to attend clinical in that facility.

Health and Safety requirements are subject to change without notice depending on clinical agency requirements

HEALTH INSURANCE

Students are required to have health insurance as a condition of enrollment in any of the EMS programs.

ACCIDENTAL EXPOSURE

- A. Accidental exposure is defined as accidentally being exposed to blood/body fluids through needle stick or skin lesion/non-intact mucosal membrane.
- B. The accidental exposure of a faculty member or student in an EMS Program while in a clinical agency is treated in a similar manner to any type of incident occurring within the agency.
- C. The student should immediately notify the Clinical Coordinator or Preceptor who will then immediately notify the supervisor within the health care facility where the incident occurred. Agency policies will then be followed. The clinical agency will require the completion of an incident report and will usually order testing. The

exposed student or faculty will then be encouraged to have testing. The decision to have testing or not; however, is the choice of the individual exposed. A signed consent/denial form will be kept in the individual's college file.

- D. The Clinical Coordinator will notify the appropriate Program Manager and submit an MCC incident report.

GUIDELINES REGARDING EXPOSURE TO INFECTIOUS DISEASES/BODY FLUIDS

A. Standard precautions, which are intended to reduce the risk of pathogen transmission, are the basic level of infection control. Students are expected to follow hand hygiene, personal protective equipment (PPE), respiratory hygiene, and linen and waste disposal guidelines recommended by the World Health Organization Standard precautions in health care:

http://www.who.int/csr/resources/publications/EPR_AM2_E7.pdf

B. All blood and body fluids are considered potentially infectious and are treated as if known to be infectious for HIV, HBV, and other blood-borne pathogens.

C. MCC EMS students are not permitted to care for clients with active/suspected tuberculosis, mumps, measles, varicella, or any client in airborne isolation/precautions.

D. EMS students who are directly exposed to body fluids must immediately notify the Clinical Coordinator.

E. Students exposed to body fluids shall follow this protocol:

1. Immediately flood the exposed area with water and clean any wound with soap and water or a skin disinfectant if available; for eye splashes rinse the area with clean water.
2. Report the incident to the Clinical Coordinator.
3. The student should immediately go to an Emergency Department, Employee Health (if available), or Urgent Care to seek triage and treatment. The student is responsible for all costs related to exposure, triage, and treatment.
4. The Clinical Coordinator and student will notify the agency department supervisor and EMS Program Director.
5. The student will complete an agency site incident report.
6. The student will complete the college student accident report

BACKGROUND CLEARANCES

- A. A background check is required for all students coming into the EMS programs. This is a requirement of our clinical sites. The background check is conducted by PreCheck, Inc. and has to be received by the EMS Department in time to be reviewed by the staff and the clinical site. To complete the request for your background check, go to www.mystudentcheck.com and make sure you are selecting Mohave Community College.
- B. If a background check comes back flagged, the EMS department will make every attempt to find a clinical placement that can accept that student. If a student is unable to be placed in a clinical facility, the student may drop or withdraw from the course per deadlines set in the MCC Academic Calendar. If the student chooses to stay in the course, they will receive a clinical failure for the course due to inability to complete the clinical requirement.

- C. Students who cannot be placed at a clinical facility as a result of the background check may not be able to finish their program or gain employment in their chosen field.

DRUG FREE CAMPUS GUIDELINES

The Drug-Free Workplace Act of 1988 has mandated that recipients of \$25,000 or more from any federal agency must maintain a drug- free workplace. Included within the requirements of the Act is the adoption of a policy statement prohibiting the unlawful manufacture, distribution, possession or use of controlled substances in the work place. While technically only those employees working in programs receiving federal aid or those students receiving Pell grants are subject to the law, drug awareness is a subject which must be addressed by all employees and students. Detailed information may be found in the MCC Student Handbook.

DRUG SCREENING GUIDELINES

- A. All students participating in any program offered through the Department of EMS will be required to complete a drug screen prior to beginning a course that has an offsite clinical associated with it.
 - 1. All students are required to submit a urine drug screen as a condition of enrollment in any program offered through the Department of EMS.
 - 2. All positive drug screens are referred to the Director of EMS Programs. Students will be required to obtain a second drug screen at their expense.
 - 3. If a student provides a dilute sample (may be marked as a negative dilute result) the student will be required to obtain a second drug screen at their expense. A sample marked as positive dilute will be considered positive and follow the process for positive results.
 - 4. Students who test positive for illegal substances, non-prescribed legal substances, or deemed unsafe for the clinical setting by the Director of EMS will not be permitted to attend EMS courses.
 - 5. All positive results except for cotinine (Nicotine) and alcohol, resulting in dismissal, are reported to the Arizona Department of Health Services.
 - 6. All positive results for marijuana will require a retest and must obtain a negative result to be eligible to attend clinical. Students with a prescription for medical marijuana would not be considered exempt from urine drug screening.

Mohave Community College and the EMS department prohibits the possession and use of marijuana on all campuses and in all off-campus student activities, including internships and clinical learning experiences. This policy is dictated by Arizona Revised Statutes § 15-108, which prohibits any person, including a medical marijuana cardholder, from possessing or using marijuana on the campus of any public university, college, community college, or post-secondary education institution. Federal legislation prohibits any institution of higher education that receives federal funding from allowing the possession and use of marijuana.

- 7. Students who fail to submit the drug screen by the required date will be withdrawn from all EMS courses.

DRUG SCREENING FOR CAUSE

- A. This policy refers to the use/misuse of, or being under the influence of: alcoholic beverages, illegal drugs or drugs which impair judgment while on duty in any health care facility, school, institution, or other work location as a representative of a MCC EMS programs.
- B. When a faculty/Clinical Instructor perceives the odor of alcohol or marijuana, or observes behaviors such as but not limited to, slurred speech, unsteady gait, or confusion, extreme fatigue or lethargy, and these behaviors cause the faculty or Clinical Coordinator to suspect the student is impaired by alcohol or drugs, the following steps are taken:
 - 1. The instructor will remove the student from the patient care or assigned work area immediately and notify the lead instructor, college Director or designee.
 - 2. Upon student's verbal consent, an employee of the Department of EMS will drive the student to the nearest Lab Corp location for testing.
 - 3. The student is to have a picture ID in his/her possession.
 - 4. After testing, the student may not return to the facility.
 - 5. If the student admits to alcohol or drug use, he/she will still require drug screening.
 - 6. The student is responsible for all costs associated with the for-cause drug screening test.
- C. If the results of the test(s) are negative for alcohol, illegal substances, or non-prescribed legal substances, the student shall meet with the Director of EMS to discuss the circumstances surrounding the behavior.
 - 1. If the indicator was the odor of alcohol, the student will be mandated to discontinue the use of whatever may have caused the alcohol-like odor before being allowed to return to the clinical setting.
 - 2. Based on the information provided the Director of EMS will decide whether the student may return to the offsite clinical setting.
- D. If the results of the test (s) are positive for alcohol, illegal substances, or for nonprescribed legal substances, the Director of EMS will withdraw the student from all EMS courses. The results of the positive screening test except for alcohol or nicotine will be reported to the Arizona Department of Health Services. If a student refuses "for Cause" Testing:
 - 1. The instructor will remove the student from the offsite clinical setting pending a full investigation.
 - 2. The instructor will contact the lead faculty and Clinical Skills Program Manager.
 - 3. Failure to comply with any aspect of this policy will result in withdrawal from the program.

READMISSION GUIDELINES RELATED TO POSITIVE "FOR CAUSE" TESTING

- A. Students seeking readmission who were withdrawn from EMS courses for reasons related to positive "for cause" testing or refusal of "for cause" testing will be required to:
 - 1. Submit a letter requesting readmission to the EMS Program Director which includes:
 - 1) Documentation from a therapist with experience in addiction behaviors indicating status and/or documented rehabilitation related to the alcohol/drug abuse.

- 2) Include documentation of compliance in a treatment program if identified as required by the therapist.
 - 3) Repeat a random urine drug screen for alcohol/drugs as instructed prior to readmission and may be subject to random drug screening at the student's expense during the program of study.
- B. If a student, after being re-admitted to the EMS program, has positive results on an alcohol/drug screen, the student will be permanently dismissed from any MCC department of EMS program and notification will be sent to the Arizona Department of Health Services.

HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA)

- A. All verbal, electronic, and written information relating to patients/clients and contracted agencies is considered confidential and is not to be copied or discussed with anyone. Information may be disclosed only as defined in HIPAA guidelines for educational purposes. A breach of confidentiality will result in disciplinary action, up to and including possible dismissal from the program and/or course.

DISCIPLINARY ACTION GUIDELINES

- A. When an EMS student is in violation of any requirement contained in this EMS Student Resource Guide or MCC's Student Handbook, he/she is subject to disciplinary action or dismissal. All students should carefully review the MCC Student Handbook section on Academic Misconduct and Disciplinary Standards. Those standards typically can be found in each college's catalog or student handbook. Dismissals and suspensions for reasons based on academic misconduct and student discipline, as well as reasons based on the MCC Student Handbook, will proceed according to the Student Code of Conduct.
- B. **Academic Misconduct:** Refer to the MCC Student Handbook for details.
- C. **Clinical Misconduct:**
- a. A student may be dismissed from the program and receive a failing grade in the course based on the inability to place the student in a clinical facility or removal from clinical due to behavioral issues.
 - b. A student may be dismissed and receive a failing grade in the course for violation of Standards of Professional Conduct.

STUDENT PRACTICE REGULATIONS

- A. Students practice within the boundaries of the Arizona Department of Health Services Practice Act, the NAEMT Code of Ethics for EMS, the guidelines of the MCC EMS Student Resource Guide, and the policies and regulations of the healthcare agency where they are assigned for clinical learning.
- B. Examples of unsafe practice include, but are not limited to:
1. Refuse an assignment based on client's race, culture, religious preference or medical diagnoses.
 2. Deny, cover-up or does not report own errors in clinical practice.
 3. Ignore or fail to report unsafe, dishonest or unethical behavior in others to the instructor.
 4. Practice skills that have not been signed off on by a faculty member.
 5. Demonstrate the inability to make appropriate clinical judgments or decisions.

6. Interact inappropriately with agency staff, co-workers, peers, clients, families, and faculty resulting in miscommunication, and disruption of the learning and client care environment.
 7. Violate principles of confidentiality.
 8. Lack of preparation for clinical practice.
 9. Fail to respect client rights and dignity.
 10. Solicit, borrow, or remove property or money from a client or client's family.
 11. Assume client care tasks for which the student lacks the education or competence to perform.
 12. Remove drugs, supplies, equipment, or medical records from the clinical setting
- C. The Department of EMS programs forbid the practice of invasive skills on any live subject (this would include student to student, student to faculty, student to volunteer, or animals) in any setting outside of the normal clinical or lab facility setting. This includes simulation or independent practice time. Invasive procedures include any procedure that penetrates the skin or is inserted into an orifice. Examples would be IV insertion, injections, blood glucose monitoring, insertion of catheters, nasogastric tubes, or the instillation of medications into the eyes, nasal passages, ears, or other areas of the body. This list is not inclusive and the Clinical Skills Manager will make the final determination on invasive procedures should questions arise.

DUTY TO REPORT

- A. All students enrolled in EMS courses holding or receiving a certificate as an EMT must remain in good standing with the AZDHS-BEMS. Students with certification and/or licensure from allied health regulatory boards are included under this provision. Students receiving any disciplinary actions against their certificate or license must notify the Director of EMS within five (5) school days. The Director of EMS reserves the right to restrict the student's participation in clinical experiences and involvement in patient care until the certificate and/or license is valid and unrestricted and terms of the action are met and the action dismissed.

ACKNOWLEDGEMENT

- I have read and understand the terms and requirements for participation in the MCC's EMS Program, as set forth in the EMS Student Resource Guide. I understand that failure to meet the terms and requirements described in the EMS Student Resource Guide may result in my termination from the program. I also agree to conduct myself as a professional and in a manner consistent with the EMS Student Resource Guide. I understand that the MCC's EMS Student Resource Guide may be modified, amended, or cancelled at any time with advanced notification of change by the EMS Program Director for any or all the following reasons: to improve the quality of the resource guide, policy or procedural change, or safety issues.

Student Printed Name: _____

Student Signature: _____

Date: _____

