# Chattahoochee Valley Community College Emergency Medical Services Program

# Clinical Preceptor Handbook





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## Introduction from the President

#### Greetings!

The 2023-2024 academic year marks a momentous period in the history of Chattahoochee Valley Community College (CVCC), the 50th Anniversary. In 1973, the Alabama Legislature established the College and it opened its doors in January 1974. Now, 50 years later, CVCC has grown to become one of the greatest resources in the Chattahoochee Valley Region.

The College has experienced many milestones and has enjoyed a rich history over this 50-year time span. Instructional courses have grown from general transfer and business offerings to also include a full array of career and technical educational options in high-wage, high-demand fields. We are a comprehensive community college, preparing students for academic transfer as well as technical careers including health sciences, applied technology, business and information technology, visual communications, multimedia design, and more.

CVCC has a faculty, staff and student population that is diverse and inclusive of individuals from all walks of life. Students are excelling academically and in their chosen careers. Our championship athletic programs are preparing students to be scholars as well as great competitors. The College has expanded the campus footprint to include four buildings previously owned by Troy University. This acquisition has enabled us to improve our service to students as well as respond to business and industry needs by enhancing our program offerings.

CVCC is transforming and capitalizing on a legacy of excellence; and it is my pleasure to serve as the sixth president of the College, during this time unprecedented change and prosperity. The College is indeed an excellent educational resource for the citizens in the Chattahoochee Valley Region and we look forward to continued growth and opportunity as we forge ahead into the next 50 years.

Whether you are returning to our college or enrolling with us for the first time, we are elated to have you as a student, and we are willing and ready to serve you. Our goal is to be as accessible and resourceful as possible, so we encourage you to let us know your needs. The College offers a friendly, nurturing environment, and we support our students from start to finish. We are committed to excellence in customer service as well as educational delivery. The College has positioned itself to engage our students in the classroom and empower them by being willing and eager participants in their educational pursuits. We are preparing our students to enter the labor market, advance to four-year colleges and universities, become leaders and providers for their families, and be responsible citizens in the community.

We take our jobs as educational leaders very seriously, and we are dedicated to providing the best possible service to the citizens of this area. We assure you that you are in the right place at the right time! Welcome to CVCC and thank you for choosing to be a part of the Pirate Family!

Jacqueline B. Screws President



## Introduction from the Program Director

Dear Dedicated Clinical Preceptors,

Welcome to our EMS Preceptor Program! I am genuinely excited to have you join us in this vital role. Your dedication and expertise are crucial to the development of our students and the well-being of our community.

As seasoned healthcare professionals, you understand the critical balance between clinical competence and compassionate care. Your mentorship is instrumental in shaping students who are not only skilled but also empathetic caregivers.

#### **Our Vision and Goals**

Together, we strive to:

- 1. **Enhance Clinical Skills:** Provide our students with the hands-on experience necessary for excellence in patient care.
- 2. **Encourage Critical Thinking:** Help students develop the ability to make sound, swift decisions in high-pressure situations.
- 3. **Promote Professionalism:** Instill a deep sense of integrity, empathy, and teamwork.
- 4. **Ensure Patient Safety:** Emphasize safety protocols and patient-centered care as the cornerstone of EMS practice.

#### Your Role and Impact

As a preceptor, your impact is immeasurable. You will:

- Lead by Example: Show what it means to provide top-notch patient care with professionalism and compassion.
- Give Constructive Feedback: Offer timely and specific feedback that helps students learn and grow.
- Create a Nurturing Environment: Foster a supportive and encouraging learning space where students feel confident to ask questions and make mistakes.
- **Assess Progress:** Provide objective evaluations to guide students' development and readiness for the field.

#### Support and Resources

We recognize the demands of your role and are here to support you fully. We offer:

- **Interactive Workshops:** Designed to enhance your mentoring skills and keep you updated with the latest in EMS education.
- Resource Materials: Access to comprehensive educational resources and up-to-date guidelines.



• **Open Communication:** A dedicated team ready to assist you with any questions or concerns you may have.

Your commitment to our students ensures they are prepared to provide excellent patient care, which ultimately leads to better patient outcomes. You are not just teaching them skills; you are helping them become compassionate, thoughtful, and effective EMS professionals.

Thank you for your unwavering dedication and for being an essential part of our educational team. Together, we are making a profound difference in the lives of our students and the patients they will serve. The photo below captures a vibrant, collaborative atmosphere where students from different disciplines came together to enhance student education and learning. This synergy between nursing, athletics, and EMS students highlights the importance of interdisciplinary collaboration in achieving better patient outcomes and fostering a holistic educational experience. The image symbolizes the college's commitment to preparing students for real-world challenges through teamwork, shared learning, and mutual support. If I can ever be any assistance to you, please do not hesitate to contact me.

Best Regards,

Tony Rider, NRP EMS Program Director





## Paramedic Program Goal

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

## **Advanced EMT Program Goal**

To prepare Advanced Emergency Medical Technicians who are competent in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains to enter the profession.

## **Faculty Contact Information**

If at any time you need to contact one of our faculty members, please feel free utilize the information listed here. Our faculty members will stop by any clinical rotation site to ensure our students are performing, as expected. We welcome any comments and recommendations that any of our preceptors may have during any visit.

| Tony Rider, NRP               | Office Location:                       |
|-------------------------------|--|
| EMS Program Director          | Chattahoochee Valley Community College |
| Office Phone: (334) 291- 4968 | 2602 College Drive                     |
| Cell Phone: (251) 238- 2246   | Phenix City, AL 36869                  |
| Email: james.rider@cv.edu     | IPAC Building Office 205               |
| John Loney, NRP               | Brennon Ryan, NRP                      |
| EMS Faculty                   | Adjunct EMS Faculty                    |
| Office Phone: (334) 291- 4968 | Email: brennon.ryan@cv.edu             |
| Email: john.loney@cv.edu      |  |
| Jonathan Woods, NRP           | Mike Hollingsworth, D.O.               |
| Adjunct EMS Faculty           | Medical Director                       |
| Email: jonathan.woods@cv.edu  | (Contact through the Program Director) |
|                               |  |



## General Considerations for the EMS Preceptor

Serving as an EMS preceptor is a critical role that involves mentoring and training EMS students. Here are some general considerations for an EMS preceptor that is teaching our students:

#### 1. Professionalism

- Lead by Example: Demonstrate professional behavior, attitude, and communication.
- Ethics and Integrity: Uphold the highest standards of ethical conduct.

#### 2. Clinical Competence

- Knowledge and Skills: Maintain up-to-date knowledge of EMS protocols, procedures, and equipment.
- Continual Learning: Stay informed about the latest advancements in emergency medical care.

#### 3. Teaching and Mentoring

- Individualized Instruction: Tailor teaching methods to the learning style and pace of the student.
- Constructive Feedback: Provide timely, specific, and constructive feedback to help the student improve.
- Encouragement: Foster a supportive and encouraging learning environment.

#### 4. Patient Care

- Safety First: Prioritize patient safety and teach the importance of safe practices.
- Compassionate Care: Emphasize the importance of empathy and patient-centered care.

#### 5. Communication

- Clear Instructions: Communicate expectations and instructions clearly and effectively.
- Active Listening: Practice active listening to understand the student's concerns and questions.
- Conflict Resolution: Address and resolve conflicts professionally and effectively.

#### 6. Assessment and Evaluation

- Objective Assessment: Evaluate the student's performance based on clear, objective criteria.
- **Documentation:** Keep accurate records of the student's progress and provide detailed evaluations.

#### 7. Legal and Ethical Considerations

- Confidentiality: Respect patient and student confidentiality at all times.
- Scope of Practice: Ensure the student understands and operates within their scope of practice.



#### 8. Professional Development

- **Self-Reflection:** Reflect on your own teaching practices and seek opportunities for improvement.
- Continuing Education: Pursue ongoing education to enhance your precepting skills.

#### 9. Team Collaboration

- Interdisciplinary Approach: Encourage collaboration with other healthcare professionals.
- **Team Dynamics:** Teach the importance of effective teamwork and communication within the EMS team.

#### 10. Stress Management

- Emotional Support: Recognize and address the emotional and psychological needs of the student.
- Self-Care: Model and teach the importance of self-care and stress management techniques.

By keeping these considerations in mind, EMS preceptors can create a positive and effective learning environment that prepares new EMS personnel for the challenges they will face in their careers. Maintaining a positive attitude toward the EMS Profession, your work, the student, and the employer will enhance the learning environment for all parties involved. Please, refrain from discussing employer issues or negative "burned out" issues with the student. If at any time the Preceptor has a disagreement with College policy, EMS Program policy, procedures, and etc.; then, the Preceptor should contact the EMS Program Director. At no time, should the disagreement be discussed with the student, as this could yield to a negative student learning outcome, at large. As well as, the student should never be used as a "messenger" between the Preceptor and the EMS Program; however, we encourage recommendations to improve our policies and procedures. We value continuous quality assurance and improvement with open respected communication. *If, at any time, the Clinical Preceptor feels the role does not fit the EMS Healthcare Provider any longer, please contact the EMS Program Director, immediately.* 

## Team Lead Role

For us to increase student learning and engagement, there must be a collaborative team effort for the student and the clinical preceptor. The student must be willing to learn and the clinical preceptor must be willing to teach. *Our clinical philosophy is for the student to watch one, do one, then teach one.* This allows the student to learn with direct supervision of an experienced healthcare provider. This will enhance the student knowledge and skill level for when they are the primary healthcare provider. If the student just sits and observes for the entire clinical rotation, then this is a disservice to the student and the future patients that the student will care for. The clinical rotation allows the student to have "hands on" and apply the knowledge that has been obtained from the didactic component.



The preferred student educational plan would be the student doing the following:

- ❖ Function under the direct supervision of the assigned preceptor on an ALS unit.
- Must perform the majority of the assessment
- **\*** Evaluate patient acuity
- Develop treatment plan
- Successfully manage the patient during transport to definitive care

### Clinical Preceptor Qualifications

The following characteristics of Clinical Preceptor enhance student learning:

- ❖ A willingness to teach as a clinical preceptor
- ❖ A non-judgmental attitude toward the student for "not knowing" information that the clinical preceptor feels they should know. Gentle Reminder, the student is exactly that a "student".
- ❖ Assertiveness to stand for the best practice of medicine and patient care.
- Flexibility to change and the ability to adapt to new situations
- ❖ Excellent communication skills
- ❖ Positive attitude toward patient care and adherence to medical standards
- ❖ Excellent critical thinking skills
- \* Excellent Interpersonal Skills with coworkers, students, patients, and families.
- ❖ Patience with the student
- ❖ Practice the clinical philosophy of watch one, do one, and teach one.
- \* Commitment to provide opportunities for EMS students to lead the patient care team.

## Hospital Requirements

Chattahoochee Valley Community College EMS Program have EMS faculty that are licensed at the level of Paramedic to oversee the education of the student in the Emergency Department setting. The student is to report to the Chattahoochee Valley Community College EMS Faculty. The EMS Program conduct regular faculty meetings to discuss the direction of the program and general educational training to the clinical site leadership. The CVCC EMS Faculty and the CVCC EMS Program Director reserve the right to visit any site that has a Memorandum of Agreement on file with the EMS Program.

Chattahoochee Valley Community College EMS provides general training to clinical site leadership and relies on those individuals to designate employees to serve as clinical preceptor in accordance with their policies. Within that structure, that do not have as assigned clinical faculty, students may be assigned to individual professionals. If Chattahoochee Valley Community College EMS Faculty are not on site, students are to report to the professional in charge of the unit to which they are assigned, and that individual should assign to a qualified clinical preceptor. If there is ever any doubt, the student is to contact their primary EMS Faculty Instructor or the EMS Program Director for guidance. The EMS Program Director will keep in contact with the leadership to make sure the program is progressing with a knowledgeable student.



#### EMS Field Requirements

EMS Clinical Preceptors must have current knowledge of the principles and concepts on EMS medical practice, including the National EMS Education Standards and CVCC Program Curriculum. If there is ever a question on current CVCC Program goals, student learning objectives, or clinical requirements for the student under our program, then the EMS Clinical Preceptor needs to reach out to their Organizational Clinical Coordinator or the designated liaison between Chattahoochee Valley Community College and that said Organization for any clarification. The Organizational Clinical Coordinator or designated liaison will contact the EMS Program Director for clarification and direction for the student.

EMS Clinical Preceptor shall meet the following criteria:

- ❖ Current unencumbered EMSP license issued by the State in which you practice.
- ❖ The EMSP shall be at least licensed at the level of the student or higher.
- ❖ Be designated by their organization or agency.
- ❖ Demonstrate a willingness and competence to work with students to assist them in meeting pertinent course objectives in the field setting.
- Supervise, regulate, and document accurately, student behavior in the field.
- ❖ Provide the student constructive feedback in a respectful manner.
- ❖ Complete the student Clinical Preceptor Review of the Student either by hard copy format, app forms, QR code, or electronic format.
- ❖ Maintain integrity in the educational process, i.e. do not sign off on skills, benchmarks, clinical hours, or competency that have not been met by the student.
- Assure that all student- performed clinical procedures and patient care treatment plans are supervised with sound judgement for an excellent patient outcome.
- ❖ Assure all documents are signed by the Clinical Preceptor, as applicable.

Chattachooche Valley Community College provides general clinical training to EMS Field site leadership and relies on those individuals to designate those individuals it authorizes to serve as EMS Clinical Preceptors in accordance with their policies. The CVCC EMS Faculty and the CVCC EMS Program Director reserve the right to visit any site that has a Memorandum of Agreement on file with the EMS Program.

## Capstone Field Internship Preceptor Qualifications

Capstone Field Internship Preceptors must have current knowledge of the principles and concepts including the National EMS Education Standards, CVCC EMS Program Curriculum, and CVCC EMS Program Clinical Requirements and Standards. The Capstone Field Internship Preceptors must also have above average knowledge and skills proficiency.



The Field Internship Preceptor must meet the following minimum requirements:

- ❖ Current unencumbered paramedic license issued by the State in which you practice.
- ❖ Two years' experience as a Paramedic.
  - o ACLS and PALS credentialing is preferred
- ❖ Complete Chattahoochee Valley Community College EMS Program's approved preceptor training in accordance with the Committee on Accreditation for the EMS Professions. (CoAEMSP).
- **Practice the clinical philosophy of watch one, do one, and teach one.**
- ❖ A willingness to teach as a clinical preceptor
- ❖ A non-judgmental attitude toward the student for "not knowing" information that the clinical preceptor feels they should know. Gentle Reminder, the student is exactly that a "student".
- ❖ Assertiveness to stand for the best practice of medicine and patient care.
- Flexibility to change and the ability to adapt to new situations
- \* Excellent communication skills
- ❖ Positive attitude toward patient care and adherence to medical standards
- Excellent critical thinking skills
- ❖ Excellent Interpersonal Skills with coworkers, students, patients, and families.
- Patience with the student
- \* Commitment to provide opportunities for EMS students to lead the patient care team.
- ❖ Be designated by their organization or agency.
- ❖ Demonstrate a willingness and competence to work with students to assist them in meeting pertinent course objectives in the field setting.
- Supervise, regulate, and document accurately, student behavior in the field.
- ❖ Provide the student constructive feedback in a respectful manner.
- ❖ Complete the student Clinical Preceptor Review of the Student either by hard copy format, app forms, QR code, or electronic format.
- Maintain integrity in the educational process, i.e. do not sign off on skills, benchmarks, clinical hours, or competency that have not been met by the student.
- Assure that all student- performed clinical procedures and patient care treatment plans are supervised with sound judgement for an excellent patient outcome.
- ❖ Assure all documents are signed by the Clinical Preceptor, as applicable.
- ❖ Provide CVCC EMS Program with your work schedule. Inform the EMS Program of any changes in your work schedule that might affect your ability to oversee EMS Students. The student that is performing Capstone Field Internship has the responsibility to work with the Capstone Preceptor and is required to report any schedule changes to the Clinical Coordinator or EMS Program Director in an effort to mitigate interruption of the educational learning track.



## Clinical Preceptors and Students Fraternization Policy

A fraternization policy for Clinical Preceptors and Students is essential to ensure professional boundaries, prevent conflicts of interest, and maintain a focus on educational objectives.

**Purpose:** To establish guidelines for appropriate interactions between Clinical Preceptors and Students to maintain professional conduct, ensure a productive learning environment, and avoid conflicts of interest or favoritism.

**Scope:** This policy applies to all Clinical Preceptors and Students involved in clinical training programs.

#### **Definitions:**

- Clinical Preceptors: Individuals responsible for supervising, mentoring, and evaluating EMS students during their clinical rotations, whether in the Hospital Setting or EMS Field Setting.
- **Students**: Individuals enrolled that are currently enrolled in the CVCC EMS Program and participating in clinical rotations.

#### **Policy:**

#### 1. Professional Boundaries:

- Preceptors and students must maintain professional relationships at all times. Personal relationships that could affect objectivity and professionalism are prohibited.
- o Preceptors should avoid any behavior that could be perceived as favoritism, bias, or conflict of interest.

#### 2. Prohibited Conduct:

- o Romantic or sexual relationships between preceptors and students are strictly prohibited.
- Social interactions outside of the clinical setting should be limited and professional. Activities such as dining together, socializing, or engaging in non-work-related conversations should be avoided to prevent the appearance of impropriety.

### 3. Reporting and Disclosure:

- Any preceptor or student who becomes aware of a potential violation of this policy must report it immediately to the program director or appropriate supervisory personnel.
- Preceptors or students who have a pre-existing personal relationship (e.g., family, close friends)
  must disclose this relationship to the program director to evaluate potential conflicts of interest
  and reassignments, if necessary.

#### 4. Consequences of Violations:

- o Violations of this policy will be investigated thoroughly and may result in disciplinary action, up to and including termination of the preceptor's role or dismissal of the student from the program.
- o Disciplinary actions will be determined based on the severity of the violation and in accordance with the institution's policies and procedures.



#### 5. Education and Training:

 All preceptors and students will receive training on the importance of maintaining professional boundaries and the specifics of this fraternization policy during orientation and periodically throughout the program.

## 6. Confidentiality:

o All reports and investigations related to potential violations of this policy will be handled with the highest level of confidentiality, respecting the privacy of all parties involved.

#### 7. Communication:

 Students are also expected to immediately report any direct awareness of another student's or clinical preceptor's inappropriate behavior.

**Review and Revision:** This policy will be reviewed annually and updated as necessary to ensure its effectiveness and alignment with institutional standards and legal requirements. By implementing and enforcing a clear fraternization policy, this EMS program can uphold the integrity of their training environment, ensuring that all students receive unbiased education and mentorship

Effective Date: 30/July/2024

Approval: Tony Rider, NREMT- Paramedic (EMS Program Director)





## **Clinical Requirements**

## Pre-Clinical Requirements:

Our students shall complete the following:

- > EMS Orientation
- ➤ Complete all requirements set forth in ACEMAPP for CVCC EMS Program
- Complete all requirements set forth in ACEMAPP for each clinical agency
- ➤ Be accepted and currently active in Platinum Planner
  - O The student will have to maintain a satisfactory account with Platinum Planner during the duration of the program. If at any time, the student is terminated from Platinum Planner due to Educational Integrity (Anti- Copying) Policy, then the student will be unable to meet clinical requirements.
- ➤ All students shall complete Clinical Lab Benchmarks prior to participating in Clinical Rotation.
- ➤ If the student is absent three consecutive scheduled class dates in the didactic component, EMS 118, then the student will be suspended from clinical rotation. The student will be required to meet with the Clinical Coordinator or EMS Program Director to get the suspension lifted.
- ➤ All students shall have obtained clearance to perform clinical requirements from the Clinical Coordinator or EMS Program Director.

## Length of Rotations:

Our students have a variety of rotation types and we try to correlate the start of the rotation at the beginning of the clinical preceptor's shift, so the student can experience shift change. We recommend for our students to arrive 15 minutes prior to the start of their scheduled clinical rotation. Student clinical rotation shall not exceed 16 hours with an 8-hour requirement to be off- shift. To meet the 8-hour required off shift requirement, that includes from working at any job of employment. Example- the student may not perform a 16-hour clinical rotation, then leave and go work at any job of employment for an 8- hour shift then return on the 9<sup>th</sup> hour to start a clinical rotation at any clinical site, which would have been done in 24 hours to start the 25<sup>th</sup> hour. This policy is not in place to restrict any student from working for monetary gain, but is in place to reduce medical errors and pharmacology errors for the safety of the patients and families we serve. No student is allowed to sleep overnight at any clinical site.

Students should remain at the clinical rotation for the length the student is scheduled. If the student leaves the site for any reason, whatsoever, before the end of the clinical rotation then please document the time of departure and report it to the Clinical Coordinator or EMS Program Director. <u>At no time, does this program approve of any Clinical Preceptor to "pencil-whip" or falsify any documentation of the student, including clinical times.</u>



Paramedic students entering the Capstone Field Internship during their last semester will be assigned to a single preceptor at an approved clinical site by this program. The student, clinical preceptor, and the Clinical Coordinator will work together to form a schedule. The student will submit a copy of the schedule to the Clinical Coordinator.

#### Clinical Site Guidelines

- > The student shall always address the clinical staff and patients in a respectful manner.
- ➤ The student shall never argue with or refuse to obey the direction of their clinical preceptor.
- > The student shall never participate in "horse play" at a clinical site.
- ➤ The student shall refrain from using abusive, racial, or obscene language. This includes telling jokes to another colleague or having a conversation with another person about your personal opinion of a subject.
- The student shall never attend a clinical rotation while under the influence of alcohol or drugs. All students are subject to random drug and alcohol testing, which will be at the expense of the student.
- The student shall never sleep at a clinical site.
- > The student shall not use smokeless tobacco, smoke tobacco, or vape during a clinical rotation due to Chattahoochee Valley Community College is a tobacco free college and that extends to our clinical sites.
- > The student is allowed to study at a clinical site, but the studying shall not prohibit the student in participating in clinical rotation.
- The student shall not have any visitors or personal phone call during a clinical rotation.
- > The student shall remain in their assigned area, unless given permission by their clinical preceptor to leave the area.
- The student shall Clock- In or Clock- Out for their Clinical Rotation within Platinum Planner.
- The student may assist or move a patient outside their assigned area to another destination by the direction of a healthcare provider or clinical preceptor.
- The student is not allowed to explore a facility for any reason.
- The student is allowed to obtain lunch during any clinical rotation. For a hospital clinical rotation, the student has the services of the cafeteria. (If the cafeteria is closed in the hospital during the hours of the student's lunch, then the student shall seek guidance from the clinical preceptor.) For an EMS Field Experience rotation, the student shall eat lunch with the clinical preceptor at the time the clinical preceptor eats lunch. If the student has a special diet, then the student shall bring their own lunch for that day but the student is not guaranteed to returned back to the clinical site to obtain that lunch.
- A preceptor may grant the student a snack break, as necessary. The student shall eat and drink in only appropriate designated areas to be in the guidelines with Joint Commission or the Organization. The student shall follow all guidelines of Joint Commission while performing a hospital rotation.
- The student <u>shall not</u> do confined space entry, high angle rescue, or "fight" fire while performing clinical rotations. The student <u>shall not</u> go into any building structure or house that is on fire while performing clinical rotations. The student <u>shall not</u> go into any unstable building structure or house while performing clinical rotations.



#### Clinical Dress Code

Chattahoochee Valley Community College EMS Program has implemented a dress code to maintain a professional appearance.

- ➤ <u>Shirts</u>- The student shall wear a CVCC EMS Polo shirt purchased from the CVCC Bookstore with their name embroidered on the shirt with their level of training.
- ➤ <u>Trousers-</u> The student shall purchase Navy Trousers from the CVCC Bookstore.
- ➤ <u>Coats-</u> The student shall purchase a coat from the CVCC Bookstore that is assigned to EMS Students. No other coats are allowed to be worn.
- ➤ <u>ID Badge-</u> The student shall always have on their person their Official CVCC EMS ID Badge on them at all times during a clinical rotation. If the student is wearing their coat, then the student shall have the CVCC EMS ID Badge attached to the outermost garment for view.
- ➤ <u>Scrubs-</u> The Paramedic students will be required to wear scrubs that have been purchased from the CVCC Bookstore. The student shall purchase the approved scrubs for the EMS Program. The student shall wear the scrubs in the hospital setting.
- ➤ <u>Shoes-</u>Black uniform boots are required in the prehospital setting due to safety reasons. Clean tennis or nursing shoes are permitted in the hospital setting. The shoes shall be black in color for the hospital setting.
- ➤ <u>Jewelry-</u> Limited to wristwatch, medical alert emblem or a plain wedding band (Student advisement- A wedding band that is smooth, typically do not tear gloves; however, a wedding band that is raised with any type of stone or diamonds have a potential to tear gloves. If the integrity of the student's gloves was to be broken, then the student could be exposed to blood or infectious disease. The student is advised to wash their hand for at least 20 seconds and rinse, then seek direction from the clinical preceptor.) The student is allowed to wear one set of stud earrings with one stud in each ear lobe. The student may wear one necklace around their neck that is tucked inside their uniform. At times, accidental exposure of the necklace may occur during the clinical rotation, if that is to occur then the student may tuck the necklace back inside their uniform once patient care is complete.
- Hair- Clean and confined, so that it does not interfere with patient care; however, it is recommended by the program for the hair length to not go pass the individual's shoulder. This can be achieved by the student pinning their hair above their shoulder. (Student advisement- Any hair length that does pass the individual's shoulders increase the risk for the student to have their hair pulled by a patient or family member. Also, the extended hair length does increase the chance for the student to get their hair caught in any fashion, which could result in injury or death of the student.)
- Nails- Short and clean; polish is allowed. Any extended length whether natural grown or artificial nails may interfere with the student performing patient care. If the student's nail is interfering with patient care by the advisement of the clinical preceptor, then the student needs to speak with the Clinical Coordinator or the EMS Program Director for direction. The Clinical Preceptor needs to document the concern and speak with the Clinical Coordinator or EMS Program Director. (Student Advisement-It



- may be required for the student to trim their nails for the safety of the patient's and families that we serve.)
- Personal- The student is expected to maintain necessary personal hygiene, including bathing daily, shampooing hair, and using underarm deodorant. Perfumes and colognes shall not be worn during clinical experiences. Any obscene tattoo will be required to be covered during clinical rotation. If the student is requested to cover the tattoo, then the student will have to comply with the request. (Student Advisement- It is not recommended for any student to obtain a new tattoo while in this program, as the student will not be given any special accommodations to take care of the new tattoo)

## Acceptable Behavior

Chattahoochee Valley Community College EMS Program students are counseled on acceptable behavior before attending clinical rotations. Students are expected to show all employees of a clinical site the same amount of respect they would show an instructor. Also, it is expected that the clinical site staff show respect to the EMS Program and to the student that is performing the clinical rotation. If either party, at any time, feels the behavior is inappropriate or unprofessional, then the behavior should be documented. The clinical site needs to report the behavior to CVCC Clinical Coordinator or EMS Program Director. The student is to report the behavior to the CVCC Clinical Coordinator, CVCC Clinical Preceptor, or EMS Program Director. If the student has a CVCC Clinical Preceptor on site at an EMS Field Experience or Hospital site, then the student needs to bring the behavior to that induvial first.

## Injury During Clinical Rotation

If the student is injured during clinical experiences, including needle stick the student shall:

- 1. Notify the CVCC Clinical Preceptor, if applicable. If CVCC Clinical Preceptor is not on site, then notify your assigned Clinical Preceptor and notify the Clinical Coordinator or EMS Program Director, immediately.
- 2. Complete and appropriate incident report or variance report required by clinical organization and required by the program. The student needs to be referred to the Emergency Department at the Clinical Organization site. If the student is performing an EMS Field Experience, then the Emergency Department destination is at the discretion of the healthcare provider and student. It is the responsibility of the student and designated clinical preceptor to notify the Clinical Coordinator or EMS Program Director. If the student is in the State of Alabama, then the student should be put in the Alabama Trauma System, if applicable, and transported to the appropriate Trauma Center. If the student meets the criteria for a Stroke, then the student should be put in the Alabama Trauma System with a Stroke Alert called to the receiving hospital. The student should be transported to the appropriate hospital for treatment, as determined by the healthcare provider and the Alabama Trauma System.



#### Clinical Deadlines

The student shall complete all required hours and competencies by the end date that is given on the current semester syllabus. All documentation should be submitted within 72 hours of the ending of the clinical rotation. Toward the end of the clinical deadline, the student will have 24 hours to complete all documentation which supersedes the 72 hours policy. The student needs to refer to the syllabus of the current semester for more direction. If the student does not complete all required hours and competencies in the clinical component that is required by this program, then the student will not be eligible to sit for NREMT Board Exam.

## Clinical Grading

A component of the clinical grading is completed by the documents that are completed by the Clinical Preceptor. For more reference on clinical grading and clinical benchmarks that shall be met during the semester, refer to the clinical course syllabi for the respective clinical course.

## Confidentiality/ Privacy

The student shall abide by the rules and regulations of each clinical site, treat all patients and staff with respect, and never breach patient health records confidentiality. Patient privacy is protected by HIPPA regulation, which is Federal Law. All students shall comply with HIPPA regulations. The Clinical Preceptor shall abide by the rules and regulations for each student, treat all students and Clinical Preceptors with respect and never breach student educational records, which is to not share student information or their clinical schedule. All Clinical Preceptors and Clinical Staff shall abide with the Family Educational Right and Privacy Act (FERPA), which is Federal Law that runs parallel with HIPPA, respectively.

## Incident Form Information

If a student is injured or has violated any aspect of the clinical site rules that is in the need of documentation, please complete the Incident Form with the watermark, *confidential*, that is at the end of this handbook. The original document should remain in the handbook, but feel free to make a copy, as necessary. In this event, the Clinical Coordinator or EMS Program Director, should be contacted immediately at 251-238-2246. The Incident From is required to be completed for an injury or violation that needs to be addressed. Any student that is injured shall be treated by a healthcare provider. Once the Incident Form is completed, please email or hand deliver to the Clinical Coordinator or EMS Program Director.

<u>Release of Liability:</u> Due to the nature of the training, there are risks involved in application of skills in the classroom and risks during the clinical component. The student is not required to participate in any activity that, in the student's opinion, would be potentially dangerous to his/her health or well-being. However, the student must complete all lab and clinical requirements in order to pass the course and to be eligible to sit for NREMT Board Exam. Each student must carry health/hospitalization/accident insurance while enrolled in the EMS Program. The student concurs not to hold Chattahoochee Valley Community College, any of its employees, any clinical preceptor, or any clinical affiliate responsible for any injury or death occurring as a result of classroom or clinical participation.



## Educational Points for each student during Clinical Rotation

#### EMT Preceptor Points:

- Patient Assessment for Medical and Trauma
- Patient Interview
- Guide on how to speak with a patient and family.
- Giving Report or Receiving Report
- Anatomy and Pathophysiology of Medical Illness, explaining the why you are doing something the way you are and the why not.
- Explaining Treatment Plans for Medical Illness and for Trauma Patients
- Review pharmacology of the purpose and why you are giving the medication to the patient.
- Demonstrate or let the student observe the patient being put in the Alabama Trauma System for a Trauma Alert or Stroke Alert, if applicable.
- Question the student and answer student questions.
- Allow the student to observe advanced procedures
- Allow the student to assist on advanced procedures, if applicable.
- Any Treatment or Medication Administration shall be supervised by the Clinical Preceptor.

#### Special Skill Sets of EMT:

- Basic patient assessment and interview
- Vital Signs Assessment
- Blood Glucose analysis
- Oxygen Administration
- CPR
- Airway Adjuncts (OPA and NPA) and Placement of Blind Airway Insertion
- EKG Placement of 3 Lead, 4 Lead and 12 Lead.
- CPAP Application
- Aspirin Administration
- Naloxone Administration (Intranasal Only)
- Nitroglycerin Administration (Sublingual or Spray only)
  - o Student cannot administer Tridil Intravenous or maintain a Tridil Drip.
- Student may administer PO Medications in the Emergency Department by the direct direction and supervision of the Clinical Preceptor and shall have a physician's order for said patient.
  - o The Student Shall follow the EMT Scope of Practice for EMS Field Experience.
- Breathing Treatments- (Albuterol Sulfate) and DuoNeb (Albuterol/ Atrovent)
- Oral Glucose Administration
- Site Maintenance of Heparin Locks and Saline Locks



#### **Limitations:**

- ➤ No IV/ IO Access
- ➤ No Medication Administration, except as noted above.
- ➤ No Intubation
- ➤ No EKG Interpretation

#### Advanced EMT Preceptor Points:

- Patient Assessment for Medical and Trauma
- Patient Interview
- Guide on how to speak with a patient and family.
- Giving Report or Receiving Report
- Anatomy and Pathophysiology of Medical Illness, explaining the why you are doing something the way you are and the why not.
- Explaining Treatment Plans for Medical Illness and for Trauma Patients
- Review pharmacology of the purpose and why you are giving the medication to the patient.
- Demonstrate or let the student observe the patient being put in the Alabama Trauma System for a Trauma Alert or Stroke Alert, if applicable.
- Question the student and answer student questions.
- Allow the student to observe advanced procedures
- Allow the student to assist on advanced procedures, if applicable.
- Any Treatment or Medication Administration shall be supervised by the Clinical Preceptor.

#### Special Skill Sets:

- All of the EMT Special Skill Sets, including the following:
- Peripheral Venipuncture (IV)
- Adult and Pediatric Intraosseous Cannulation (IO)
- Medication Administration, while in the Emergency Department:
  - o Student may administer PO Medications in the Emergency Department by the direct direction and supervision of the Clinical Preceptor and shall have a physician's order for said patient.
  - o Student may administer IV Medications and IV Fluids by the direct direction and supervision of the Clinical Preceptor and shall have a physician's order for said patient.
- Student shall not: (In the Emergency Department or the EMS Field Experience)
  - Administer Potassium IV
  - Start or Maintain Vasopressor Medication Drips
  - Start or Maintain Tridil IV
  - Start or Maintain a Heparin Drip IV
  - Administer Propofol IV or Maintain a Propofol Drip IV
  - Administer Paralytic Medications



- Medication Administration for EMS Field Experience:
  - Acetaminophen
  - Albuterol Sulfate
  - Albuterol Sulfate/ Atrovent
  - Aspirin
  - Cefazolin (Ancef)
  - Ceftriaxone (Rocephin)
  - Dextrose 50 %
  - Dextrose 10 %
  - Diphenhydramine
  - Epinephrine 1:1,000
  - Epinephrine 1:10,000
  - Glucagon
  - Hydroxocobalamin (Cyanokit)
  - Lactated Ringers
  - Oral Glucose
  - Methylprednisolone
  - Midazolam (Intranasal Only)
  - Naloxone
  - Nitroglycerin
  - Nitrous Oxide
  - Normal Saline 0.9 %
  - Racemic Epinephrine
  - Thiamine
  - Toradol
  - Tranexamic Acid (TXA)
  - Ondansetron (Zofran)

#### Limitations:

- ➤ No Endotracheal Intubation
- ➤ No EKG Interpretation
- > No Cardiac Pacing
- ➤ No Synchronized Cardioversion
- ➤ No Team Lead for Cardiopulmonary Resuscitation



#### Paramedic Preceptor Points:

- Patient Assessment for Medical and Trauma
- Patient Interview
- Guide on how to speak with a patient and family.
- Giving Report or Receiving Report
- Anatomy and Pathophysiology of Medical Illness, explaining the why you are doing something the way you are and the why not.
- Explaining Treatment Plans for Medical Illness and for Trauma Patients
- Review pharmacology of the purpose and why you are giving the medication to the patient.
- Demonstrate or let the student observe the patient being put in the Alabama Trauma System for a Trauma Alert or Stroke Alert, if applicable.
- Question the student and answer student questions.
- Allow the student to observe advanced procedures
- Allow the student to assist on advanced procedures, if applicable.
- Any Treatment or Medication Administration shall be supervised by the Clinical Preceptor.

#### Special Skill Sets:

- All of the EMT, Advanced EMT Special Skill Sets, including the following:
- Advanced Patient Assessment (Medical and Trauma)
- External Cardiac Pacing
- Naso-gastric Tube Placement
- Chest Needle Decompression of a Tension Pneumothorax
- Medication Administration
- Endotracheal Intubation
  - o Direct Laryngoscope
  - o Video Laryngoscope
- 12 Lead EKG Interpretation and Analysis
- Advanced Cardiac Life Support Medications and Procedures
- Pediatric Advanced Life Support Medications and Procedures

#### **Limitations:**

- None, other than what is specified in the State of Alabama EMS Guidelines.
- Paramedic Students are not allowed to dis-impact patients or perform a urinary catheter skill; but they are allowed to observe the skill or assist with the skill.



## Chattahoochee Valley Community College EMS Program Incident Form

| Incident Date:      | //                       | Tir                     | ne of Incident:/_ | /             |
|---------------------|--------------------------|-------------------------|-------------------|---------------|
| Clinical Site:      |                          | Cli                     | nical Unit:       |               |
|                     | :                        |                         |                   |               |
| Clinical Preceptor  | Phone Number:            |                         |                   |               |
| Clinical Preceptor  | Credentials: EMT         | Advanced EMT            | Paramedic         | RN            |
| CVCC Student Na     | ame:                     |                         |                   | ~ /           |
| CVCC Student Le     | evel of Training: E      | MT Advanced             | EMT Paramedic     | 16            |
| Charge Nurse/ Suj   | pervisor/ Field Supervis | sor in charge at time o | f Incident:       |               |
| Notification of the | Clinical Coordinator o   | r EMS Program Direc     | etor: yes no      | 1200 20       |
| How did I notify t  | he Clinical Coordinator  | or EMS Program Dir      | rector: email pho | ne In- Person |
| Potentially Infecti | ous Exposure: (Check a   | all that apply)         |                   | 8             |
| What part of the b  | ody was exposed: (Che    | ck all that apply)      |                   |               |
| Eyes                | Nose                     | Mouth                   | Skin              | Chest         |
| Left Upper          | Right Upper              | Left Lower              | Right Lower       | Abdomen       |
| Extremity Ears      | Extremity  Buttocks      | Extremity Other:        | Extremity         |               |
| Details of the Inci | dent:                    |                         |                   |               |
|                     |                          |                         |                   |               |
|                     |                          |                         |                   |               |



How was the Incident Caused or Contributing Factors? (Check all that apply)

| Combative Patient                     | Accidental Exposure                     | Confined Working Quarters, e.g cardiac arrest, extrication of a  |
|---------------------------------------|---|--|
|                                       | 7                                       | patient in a vehicle   |
| Close proximity to the individual     | Equipment Malfunction                   | Vehicle Wreck  |
| while providing patient care          |   |  |
| Other:                                |   |  |
| Personal Protective Equipment Used a  | at the Time of Incident: (Check all the | hat apply)   |
| Gloves                                | Gown                                    | Surgical Mask  |
| N-95 Mask                             | Googles                                 | Eye Protective Wear, e.g. face shield, etc.  |
| Headgear                              | Shoe Covers                             | Boots  |
| SCBA (Self- Contained Breathing       | Bunker Gear (Turnout Pants)             | Bunker Gear (Turnout Coat)   |
| Apparatus)                            |   | A STATE OF THE STA |
| reatment provided to the Student: (S  | Short Summary, e.g. IV, Intubation, C   | CXR, Labs, Chest Tube, etc.)   |
| Treatment provided to the Student: (S | Short Summary, e.g. IV, Intubation, C   | CXR, Labs, Chest Tube, etc.)   |
| Treatment provided to the Student: (S | Short Summary, e.g. IV, Intubation, C   |  |
|                                       | 1977                                    |  |
|                                       | 1977                                    |  |
|                                       | 1977                                    |  |
|                                       | 1977                                    |  |
|                                       | 1977                                    |  |
| AR                                    | KAVERSAI<br>Cogacy of Excelle           | XY Succe   |
| Clinical Preceptor Signature:         | Cogacy of Execution                     | XY Succe   |