



INDIAN RIVER STATE COLLEGE
Emergency Medical Services

Syllabus Supplement
Paramedic Program
2017-2018

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Introduction

Welcome to the Indian River State College Emergency Medical Services (EMS) Program. You have chosen a very exciting and rewarding healthcare profession. The IRSC EMS curriculum is a challenging program designed to help meet your career goals. You will experience an array of new challenges, wonderful ideas, and varied cultures, all in an exceptional learning environment.

This document is the Syllabus Supplement Paramedic Program. The Program has established the rules and regulations in this supplement based on many years of educational experience by the EMS faculty in training emergency medical services professionals. This document provides a common basis for the fair and equitable treatment of all recruits in the IRSC EMS Program.

All EMS recruits are expected to become familiar with the policies, rules, and regulations contained in this document as well as the Academic Catalog, the Student Handbook, the College's website, the Health Science Division Student Handbook, the Paramedic Program Handbook, and other publications, as they are the basis for how the Program will interact with EMS recruits. Recruits are also responsible for knowing the policies of their respective clinical and field sites.

The Program reserves the right to change requirements, curriculum, and rules and regulations as the educational, legal, or healthcare environment changes and as deemed necessary by the Program, the Program Medical Director, the EMS Advisory Committee, the Florida Department of Health-Division of Emergency Preparedness and Community Support-Bureau of Emergency Medical Oversight-EMS Program, the Commission on Accreditation of Allied Health Education Programs/Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions, and other local, state, and federal rules and regulations. Prior to implementing changes, recruits will be informed in writing or by email. Once notified, recruits will be expected to comply with the changes. In the rare case of an emergency change, the change will be communicated in writing or email as soon as possible after the change is enacted. Unless otherwise noted, rules and regulations contained in course syllabi and this supplement supersede the rules and regulations contained in the other handbooks.

It is important for each recruit to understand and follow both the letter and spirit of each policy. From time to time, situations will present themselves that are not covered by specific language of the rules and regulations. In such cases recruits and faculty will be guided by best judgment, best practices, professional ethics, and the intent of current written rules and regulations.

All recruits are subject to all the following rules and regulations unless otherwise noted. Any recruit violating these rules and regulations, written or unwritten, will be subject to disciplinary action. Regardless of written language, recruits must always present themselves as a professional member of an elite community. Recruits who fail to represent the pride, integrity, and wholesomeness expected of EMS personnel will be considered in violation of the Program's rules and regulations, whether written or unwritten, and may be dismissed from their course and/or program of study.

Recruits are encouraged to consult with Program staff concerning any matter that is unclear about the course, rules, regulations, probation, or any subject with which they may be having difficulty.

Overview of the EMS Profession

The following overview of the EMS profession is from the *National EMS Scope of Practice Model*:

The *National EMS Scope of Practice Model* defines the practice of EMS personnel. EMS personnel are unique health care professionals in that they provide medical care and transportation in an out-of-hospital setting with medical oversight. EMS personnel are not independent practitioners. While the practice is not independent, it is relatively unsupervised and often has little backup. Therefore, EMS personnel must be able to exercise considerable judgment, problem-solving, and decision-making skills.

Most EMS personnel work in emergency medical organizations that respond to emergency calls. Emergency response is typically a local government function (or contracted by local government to a private entity). In most communities, citizens call 9-1-1 when they need emergency medical care, and the appropriate EMS resources are dispatched. EMS personnel respond and provide care to the patient in the setting in which the patient became ill or injured, including the home, field, work, industrial, and recreational settings. In the case of emergency calls, EMS personnel are unique in that they typically have a “duty to act.”

Many EMS personnel provide medical transportation services for patients requiring medically supervised transportation, either exclusively or in addition to emergency response. These “medical transports” generally do not fall under the “duty to act” responsibility of emergency response. Some EMS personnel provide interfacility transfers of very high acuity patients.

In some cases, EMS personnel “stand by” at mass gatherings (for example, concerts, sporting events, etc.) and high-risk activities (for example, fireground operations, etc.). EMS personnel occasionally serve a combined emergency response and occupational/primary care role in remote areas (for example, off-shore oil rigs, wildland fires, etc.) Increasing numbers of EMS personnel are working in more traditional health care settings in the hospital (especially emergency departments), urgent care centers, doctor’s offices and long-term care facilities. Finally, EMS personnel are becoming involved in numerous public health initiatives (immunizations, illness and injury prevention programs, etc.).

Emergency Medical Services are a local function and organized in a variety of ways. Common models are municipal government (fire-based or third-service) or a contracted service with a private (profit or nonprofit) entity. EMS personnel also can be categorized in a variety of ways. Those trained to higher levels tend to be

paid (either full- or part-time) while those trained to lower levels tend to be volunteers or partially paid.

EMS provides out-of-hospital medical care to those with perceived urgent needs. It is a component of the overall health care system. EMS delivers care as part of a system intended to attenuate the morbidity and mortality associated with sudden illnesses and injury. The positive effects of EMS care are enhanced by linkages with other community health resources and integration within the health care system.

EMS Code of Ethics

Professional status as an Emergency Medical Services (EMS) Practitioner is maintained and enriched by the willingness of the individual practitioner to accept and fulfill obligations to society, other medical professionals, and the EMS profession. As an EMS practitioner, I solemnly pledge myself to the following code of professional ethics:

- To conserve life, alleviate suffering, promote health, do no harm, and encourage the quality and equal availability of emergency medical care.
- To provide services based on human need, with compassion and respect for human dignity, unrestricted by consideration of nationality, race, creed, color, or status; to not judge the merits of the patient's request for service, nor allow the patient's socioeconomic status to influence our demeanor or the care that we provide.
- To not use professional knowledge and skills in any enterprise detrimental to the public well being.
- To respect and hold in confidence all information of a confidential nature obtained in the course of professional service unless required by law to divulge such information.
- To use social media in a responsible and professional manner that does not discredit, dishonor, or embarrass an EMS organization, co-workers, other health care practitioners, patients, individuals or the community at large.
- As a citizen, to understand and uphold the law and perform the duties of citizenship; as a professional, to work with concerned citizens and other health care professionals in promoting a high standard of emergency medical care to all people.
- To maintain professional competence, striving always for clinical excellence in the delivery of patient care.
- To assume responsibility in upholding standards of professional practice and education.

- To assume responsibility for individual professional actions and judgment, both in dependent and independent emergency functions, and to know and uphold the laws which affect the practice of EMS.
- To be aware of and participate in matters of legislation and regulation affecting EMS.
- To work cooperatively with EMS associates and other allied healthcare professionals in the best interest of our patients.
- To refuse participation in unethical procedures, and assume the responsibility to expose incompetence or unethical conduct of others to the appropriate authority in a proper and professional manner.

Originally written by Charles Gillespie M.D.; Adopted by the National Association of Emergency Medical Technicians, 1978; Revised and adopted by the National Association of Emergency Medical Technicians, June 14, 2013.

Core Values, Focus, Vision & Purpose

Core Values

Competence, Compassion, Character

Focus

Cooperatively train caring, competent, and compassionate EMS professionals to preserve life, promote health and safety, and champion the profession.

Vision

The Indian River State College Emergency Medical Services Program's is a national leader in EMS education through attention to academic and clinical excellence, collegial partnerships, relevant research, and unwavering professionalism.

Purpose

The purpose of the Indian River State College EMS Program is to provide the highest quality instruction at the lowest possible cost to its recruits, insuring at all times that the standards and requirements of Indian River State College and its "Communities of Interest," the Florida Department of Health-Division of Emergency Preparedness and Community Support-Bureau of Emergency Medical Oversight-EMS Program, and the Committee on Accreditation of Educational Programs for the EMS Professions (CoAEMSP) of the Commission on Accreditation of Allied Health Education Programs (CAAHEP) are met and/or exceeded.

The Program enables recruits to gain a unique and in-depth experience in prehospital medicine. Through a rigorous process of academic and clinical applications, recruits are prepared to fulfill

the roles and responsibilities of an EMS professional as they pertain to the care and transportation of the sick and injured.

The Program stresses recruits demonstrate strong interpersonal skills, critical thinking abilities, good decision-making, and the capacity for making quick and appropriate judgments regarding patient care.

The Indian River State College EMS program desires to educate caring, competent, and compassionate medical professionals for service to the public. Upon successful completion of this Program, recruits are well prepared to assume their duties as a patient advocate—working always to act on behalf of those in need. Recruits will have also mastered the skills necessary to satisfy the requirements for state and national certification. As professional healthcare providers, IRSC graduates are taught how to interact effectively with other emergency services personnel, to be dynamic leaders, to value life-long learning and personal development, to be of service within their communities, and above all to respect and sustain human life.

ICARE Values

The Program subscribes to the philosophies of the ICARE program. This program was developed to promote the importance of the following five identified values for EMS providers:

Integrity
Compassion
Accountability
Respect
Empathy

These values characterize important traits of professional EMS providers and the entire EMS profession. These values are expectations of both recruits and instructors and will be upheld throughout all program courses in the classroom, lab, clinical, and field settings. These values are incorporated into all program activities and are subject to disciplinary action if breached.

Faculty & Staff

Current EMS Department faculty and staff information can be found on the department's website at www.irscems.org.

Communication with Faculty & Staff

- Email via RiverMail is the official means of communication.
- Telephone contact should only be a secondary means of communication unless directed.
- The Program may also choose to use other communication methods (i.e., Blackboard, social networking, other technologies).
- Texting may only be used as a secondary means of communications, and text-to-landline services should not be used.

- Faculty are available during regularly scheduled office hours. Other times will be by appointment only.
- All faculty and staff must be addressed by their title or title and surname (e.g., Chief, Professor, Dean Hubbard, Dr. Ferraro, Capt. Lewis).
- All EMS and fire academy personnel are to be addressed at the minimum rank of captain except personnel who have earned higher ranks who should be addressed using their respective ranks (e.g., Chiefs Dinsch, Felicione, Harshburger, and Kemp).
- “Sir” or “ma’am” will be the last word spoken by a recruit (e.g., “Sir, yes sir,” or “Ma’am, no ma’am.”).
- Clinical/field preceptors should be addressed in whatever professional manner they direct that is appropriate for the setting.
- If there are any questions about how to address someone, always err on the side of greater professionalism.

Reporting to Instructors’ Offices

When reporting to instructors’ offices, recruits will report as follows:

- 1) Approach the office, knock twice and wait for the command to enter.
- 2) When given the command to enter, state either:
 - a) “Sir/Ma’am, Recruit (*state your last name*) (*state your request*);” or
 - b) “Sir/Ma’am, Recruit (*state your last name*) reporting as ordered.”
- 3) Recruit will remain at the door until the instructor grants permission to enter.
- 4) Upon completion of the conversation, the recruit will again come to the position of attention and state “Sir/Ma’am, Recruit (*state your last name*) requests permission to leave.” When given the affirmative response, the recruit may leave.

Recruit Contact Information

Recruits are required to maintain current, valid contact information with IRSC and the Program. Any updated contact information must be provided to your academic advisor, lead instructors and the Program Director.

Program of Instruction

Curriculum

The EMT and paramedic programs follow the National EMS Education Standards. Recruits who complete the diploma, certificate, or degree programs are eligible to sit for the National Registry exam for the respective program level for national certification and State of Florida EMS licensure. Information on the specific programs and courses can be found in the Academic Catalog.

Planned Program Outcomes

The EMT and paramedic programs are comprehensive courses of study designed to provide the recruit with the cognitive, psychomotor, and affective knowledge and skills that are essential in performing the duties of an EMS professional. The programs offer a broad-based and comprehensive educational experience, rooted in formal classroom instruction, a variety of clinical rotations, and a comprehensive field internship. In each of these phases of the programs, recruits are encouraged and supported by their instructors to take responsibility for their learning and to develop a knowledge base that will make them life-long learners and leaders in the emergency medical services field.

Paramedic Program Goal

To prepare competent entry-level paramedics in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains.

Paramedic Program Learning Outcomes

Upon successful completion of the IRSC Paramedic program, recruits must be able to:

1. Demonstrate an ability to understand, interpret, and apply EMS and general medical knowledge necessary to function as a paramedic in healthcare and public safety settings.
2. Demonstrate technical proficiency in a broad range of paramedic level EMS skills, both difficult and routine.
3. Demonstrate effective teamwork in managing simulated emergency scenarios.
4. Demonstrate proficiency in advanced patient assessment and formulation and implementation of treatment plans for patients with a variety of medical and traumatic emergencies.
5. Demonstrate leadership in the management of prehospital care.
6. Demonstrate an ability to conduct oneself as a paramedic in an ethical and professional manner.

Successful Course and Program Completion

To successfully complete a program of study with the Indian River State College EMS Program, recruits must successfully pass all required program courses with a grade of C or better. Recruits must also fulfill all didactic, lab, clinical, and field requirements and consistently demonstrate minimum acceptable standards of mastery for all cognitive, psychomotor, and affective objectives as measured by examinations, labs, and performance appraisals as specified by the Program Medical Director, Program Director, and faculty in consultation with the EMS Advisory Committee.

Certificates of completion will be issued within fourteen (14) days of successful program completion as per Florida Statutes, Section 401.2701. The Program will also submit a roster of to the State listing all graduates eligible to take the State certification examination.

The Program does **NOT** guarantee registration/certification/licensure by the State of Florida, the National Registry of Emergency Medical Technicians, or any other entity for the legal privilege to practice prehospital emergency medicine. Completing this course of study prepares the recruit for competency examination, but cannot guarantee the recruit will be successful in that examination process. Successful completion of a program of study does **NOT** grant recruits the right to begin practicing in the field unless specifically authorized to do so by the respective governing agency.

Academy Format

The Indian River State College EMT and paramedic programs are operated in an academy format like that used in IRSC's fire and law enforcement academies. This paramilitary format helps to teach and reinforce many of the affective objectives required as part of the curriculum, including the self-discipline required to be an EMS professional. While this format is not the only successful model, it has proven extremely successful in IRSC's fire and law enforcement academies as well as many of the nation's accredited paramedic programs, and recruits have benefited from being made not only ready to perform intellectually and technically upon graduation, but also professionally, increasing their employability. The general policies contained in this document are designed to work well within this format or a standard classroom.

Recruits in semester-long or longer academy-format programs will be assigned to a "squad" which they will work in for the duration of their program. That squad is intended to simulate the team environment that recruits will work in after finishing their programs. Each squad will have individuals assigned to fill one or more of the roles identified below. Squads are encouraged to develop their own group identities and are encouraged to work together both in and out of class.

In addition, the paramedic recruits may also have appointed or elected class officers to represent the classes to the Program's leadership. This will be done through regular meetings with Program leadership to discuss how the Program could be improved. The Class Leader (President) and Assistant Class Leader (Vice President) from the Paramedic cohort(s) may also serve as members of the EMS Advisory Committee alongside the representatives from the area's fire-rescue agencies, ambulance services, hospitals, and health care professionals.

Class and Squad Leadership Roles, Reporting Structure, Duties and Responsibilities

Specific roles, general reporting structure, and duties and responsibilities of the class and squad leadership positions are listed below. As Program recruits, all positions are subject to direction from all Program faculty and staff even if not specifically stated in the reporting hierarchy. These duties are subject to change by the Program Director and/or faculty as needed. Finally, while an individual may have a class leadership role, all recruits are still members of a squad and subject to the direction of squad leadership.

Class Leader (Paramedic Only)

To foster responsibility and accountability, each Paramedic cohort may have a Class Leader appointed. The Class Leader will work directly with the Program staff to ensure efficient day-to-

day operations within the classroom environment. The Class Leader will serve as the direct contact between the squad leaders and the Program staff.

Reporting: Program Director and Lead Instructor.

Duties and Responsibilities:

- Serve as the direct liaison between the Program staff and the squad leaders.
- Serve as a role model for the Squad Leaders and members in both manner and dress.
- Ensure that all Squad Leaders are aware and informed of their duties and assist/mentor them in fulfilling those duties as necessary.
- Assist the program staff in enforcing all rules and regulations.
- Responsible for a weekly meeting with the Assistant Class Leader and Squad Leaders.
- Address all discussed topics appropriately (e.g., a minor problem with a specific individual may be addressed face to face; however, a more severe problem with the individual may be discussed with faculty).
- Serve as an aid to the Program Director and Lead Instructor.
- Meet weekly with the Lead Instructor and Program Director about any problems, concerns, ideas, or upcoming events
- Address the class weekly on progression, successes, and areas needing work, concerns, problems and upcoming events.
- Make sure that the room is clean and ready before the start of the day including audiovisual equipment.
- Work in collaboration with the Squad Leaders to make sure that recruits are turning in their homework/assignments.
- Serves as a member of the EMS Advisory Committee.
- Support all other officers and assist in time of need

Assistant Class Leader (Paramedic Only)

Each Paramedic cohort may also have an Assistant Class Leader appointed that will work directly with the Class Leader. The Assistant Class Leader will serve as an assistant to the Class Leader.

Reports to the Program Director, Lead Instructor, and Class Leader.

Duties & Responsibilities:

- Assist the Class Leader with all duties.
- Serve as a role model for the Squad Leaders and members in both manner and dress
- Participate in a weekly meeting with the Class Leader and Squad Leaders.
- Responsible for taking roll every morning and reporting any absences/tardies to the Lead Instructor.
- Collect monthly evaluations from recruits.

- Collect paperwork as directed when it is due and make sure it is submitted, in alphabetical order, to the Program Director and/or Lead Instructor.
- Serves as a member of the EMS Advisory Committee.
- Assume the duties of the Class Leader in the event of his/her absence.

Squad Leader

Each class is divided into small groups of between 4 and 8 recruits. These groups are referred to as "squads" and are numbered from 1 to 6. Once formed, each squad will remain as a cohesive team working together throughout the semester. Squads will work together during skill practice sessions and will respond to class scenarios when on duty. In addition, squads are encouraged to assemble outside of class to study for didactic and practical exams. Precedence has shown that a strong squad fosters strong individuals. To develop leadership skills and encourage accountability, each squad will have a Squad Leader appointed.

Reports to the Lead Instructor and Class Leader.

Duties & Responsibilities:

- Serve as a role model for the squad members in both manner and dress.
- Maintain accountability for each squad member during class.
- Serve as the primary liaison between the instructional staff and squad members.
- Notify squad of any important announcements.
- Ensure that all squad members have maintain current contact information with the Program and that all are checking email.
- Ensure that all squad related duties are assigned and completed as required.
- Encourage, mentor and assist other squad members with class related responsibilities.
- Contact the squad members assigned as mentors to lower classes and make sure that each mentor is contacting their mentee on a regular basis.

Assistant Squad Leader

To develop leadership skills and encourage accountability, each squad may have an Assistant Squad Leader appointed.

Reports to the Lead Instructor, Class Leader, and Squad Leader.

Duties & Responsibilities:

- Serve as a role model for the squad members in both manner and dress
- Assists the Squad Leader in daily roles.
- Assumes the role of Squad Leader in his/her absence.

Clinical Officer

To ensure the organization of the clinical sections of the Program, each squad may have a clinical officer appointed. The Clinical Officer will serve as a liaison between the recruits and the Clinical Coordinator and Clinical Educators.

Reports to the Clinical Coordinator, Lead Instructor, Clinical Facilitators, and Class Leader.

Duties & Responsibilities:

- Present the weekly clinical assignments to the class to remind recruits of their shift schedules.
- Read any necessary clinical announcements before and/or after class.
- Collect all clinical paperwork, verify that it is filled out correctly, and submit it to the appropriate Program staff members.
- Work with the Documentation Coordinator to ensure timely and accurate completion of Fisdap entries.
- Notify squad leaders of progress of clinical/field hours or lack thereof.
- Assure that all recruit/preceptor partnerships are conducive to a healthy productive learning environment.
- Report any concerns/problems to the Clinical Coordinator and Clinical Educators via email, copying the Program Director.
- Report to class of any announcements from Clinical Coordinator or Clinical Educators.

Community Service Officer

To effectively bridge the gap between public service and the community, the Program emphasizes good citizenship through service to the Program, the College, and the community. Classes may have a Community Service Officer appointed to coordinate these efforts. The Program Director will report new events to the paramedic Community Service Officer who will be responsible for making sure that the EMT Community Service Officers are aware of all events.

Reports to the Program Director, Lead Instructor, and Class Leader.

Duties & Responsibilities:

- In coordination with the Program Director, communicate new events to recruits along with important details.
- Keep signup sheets for each event, and hold recruit's accountable for showing up and participating.
- Maintain event flyers and signup sheets so that class members can access them.
- Keep track of peer participation to monitor individual and class success, and report the progress of current and previous events to the Program Director.

Curriculum Officer

To ensure the organization of the classroom section of the Program, a Curriculum Officer may be appointed. The Curriculum Officer will serve as a liaison between the recruits and the lead instructor for assignment questions.

Reports to the Lead Instructor, Lead Lab Facilitators, and Class Leader.

Duties & Responsibilities:

- Present the weekly homework assignments to the class to remind recruits of their outstanding homework assignments.
- Read any necessary curriculum announcements before and/or after class.
- Collect all homework, verify that it is filled out correctly, and then return to the lead instructor in alphabetical order.
- Report recruits not having homework to the lead instructor to be sent home to complete any missing assignments.
- Notify squad leaders of progress of homework or lack thereof.
- Assure that all recruit/instructor partnerships are conducive to a healthy productive learning environment.

Equipment Officer

To oversee the lab equipment and ensure organization during skills rotation, an Equipment Officer may be appointed.

Reports to the Lead Instructor, Lead Lab Facilitator, and Class Leader.

Duties & Responsibilities:

- Keep inventory of the lab equipment and notify the Program Director when supply of an item is low.
- Make sure that equipment is stored in its proper location and that the equipment storage is clean and organized.
- Check all equipment to make sure it is working properly prior to lab set up.
- Responsible for maintaining lab equipment checklists identifying what is needed in each lab station and making those lists available to instructors and/or recruits.

Lab Officer

To oversee the lab process and ensure organization during skills rotations, one or more Lab Officers may be appointed.

Reports to the Lead Instructor, Lead Lab Facilitators, and Class and/or Squad Leader.

Duties & Responsibilities:

- Ensure lab equipment is properly set up prior to lab station commencement.
- Responsible for meeting with the lead lab specialist and informing the other lab specialists of their designated area and the skill they will be instructing.
- Ensure that lab stations are rotating per schedule.
- Responsible for breaking down labs and ensuring all equipment is put away at the end of the day.
- Collect all skills instructor evaluations and make sure that they are submitted to the Class Leader for submission to the Program Director.
- If lab specialists are late, ensure recruits are reviewing lecture content to prepare for lab.
- Ensure that Squad Leaders and Assistant Squad Leaders are keeping their groups on task during lab time.

Morale Officer

Morale is the state of the spirits of a person or group as exhibited by confidence, cheerfulness, discipline, and willingness to perform assigned tasks. High morale is an important part of the EMS Academy. As morale falls, the spirit and drive to succeed falls as well; therefore, a morale officer may be appointed.

Reports to the Lead Instructor and Class Leader.

Duties & Responsibilities:

- Keep the class motivated by example and enthusiasm daily:
 - Be involved in class discussion and always be the first to participate.
 - Be creative in motivational techniques.
 - Encourage class and squad mottos.
 - Always be optimistic.
- Facilitate the ICARE program, and announce all praise reports to class at the start of class.
- Enforce a “no whining” zone.
- Present a "motivation of the day" to the class daily (i.e., this may be in the form of a humorous or inspiring movie, video, TV clip, or just an interesting statement).

Physical Training Officer

To promote physical health and agility, a Physical Training Officer may be appointed.

Reports to the Physical Training Instructor, Lead Instructor, Lead Physical Training Facilitator and Class Leader.

Duties & Responsibilities:

- Coordinates and plans physical training including stretching, calisthenics, running, and sports activities.
- Ensure all members have the proper training equipment/safety equipment.
- Ensure all members are participating and motivated.
- Coordinates alternate physical training if members are unable to fully participate.

Time Management Officer

Punctuality and time management are integral parts of the EMS Academy. To promote punctuality, one or more Time Management Officers may be appointed.

Reports to the Lead Instructor or Lead Lab Facilitator.

Duties & Responsibilities:

- Give verbal warning to classmates five minutes prior to assigned time and destination.
- Stay in contact with squad leaders regarding specific times and destinations of events.
- Remind instructors to allow breaks on a regular basis as agreed upon.
- Give verbal warning for first time violators, and report second and subsequent violations to the instructor for disciplinary action.

Uniform Officer

To promote uniformity and teamwork, one or more Uniform Officers may be appointed.

Reports to the Program Director, Lead Instructor, Lead Lab Facilitators, and Class Leader.

Duties & Responsibilities:

- Responsible to ensure that all uniform and grooming standards are met:
 - Ensure that 15 minutes prior to class, everyone is dressed in the proper uniform and ready for inspection.
 - If standards are not met, allow recruit 10 minutes to correct the problem.
 - If the problem is not corrected by 5 minutes prior to class, report the violation to the instructor for action.

Ethics and Standards of Conduct

Due to the high standards of the Program and the EMS profession, recruit conduct must reflect professionalism, integrity, and responsibility always. The following section sets forth ethical standards, standards of conduct, and examples of misconduct subject to disciplinary action (including probation or dismissal from a program of study).

Ethical Standards

Recruits are expected to meet the following ethical standards while in their programs:

- EMS personnel at all levels are healthcare professionals regardless of whether they receive monetary compensation for their work. Thus, these individuals are bound by the highest standards of professional conduct and ethics. The Program will not tolerate a breach of these standards by its recruits.
- Recruits must conduct themselves in an ethical manner throughout the classroom, clinical, and field internship phases of the program. Failure to adhere to these standards may result in immediate dismissal from the course and/or program of study. Violation of these standards includes, but is not limited to, physical violence, stealing, cheating, or breach of patient confidentiality.

State Regulations

Recruits are responsible for knowing the requirements of Section 401, Florida Statutes and Chapter 64J-1, Florida Administrative Code. Failure to comply with these regulations may result in action by the Department of Health that may jeopardize a recruit's ability to practice and subsequently to continue in the Program.

Professional Behavior

Recruits are introduced to professional behavior and service excellence concepts during orientation and are expected to develop and display appropriate affective attitudes and behaviors throughout the Program. Each recruit's behavior always, both in class and out, reflects upon the recruit, his or her agency if sponsored, the Program, and the EMS profession. This is true both while "on-duty" in class, clinicals, or field internships and while "off duty" as the public holds EMS personnel to a higher standard always. Therefore, the recruit must conduct him/herself in a professional and responsible manner always as described below. **Failure to demonstrate professional behavior may result in failure of a course or dismissal from one's program of study.**

Misconduct

Recruits are subject to disciplinary action up to and including dismissal from the course and/or program of study for misconduct in conjunction with Program activities. Recruits may also be subject to the same disciplinary action for misconduct while off campus and not involved in Program activities if said misconduct adversely affects the Program, the College, or the EMS system or the pursuit of their educational objectives.

Giving false statements (written or verbal), forging, defrauding, deceiving or engaging in any other behavior lacking in integrity and moral principles or that results in arrest and/or misdemeanor or felony criminal charges, irrelevant of adjudication, may result in immediate termination from the program.

Recruits are expected to report any misconduct or violation of policy by themselves or fellow recruits. Failure to report may result in immediate termination from the program.

Recruits that are arrested and charged with any violation that would otherwise prevent them from entering the program will be immediately suspended from the program pending resolution of the charges.

Proper Decorum

Classroom & Lab

- Arrive on time. If unavoidably late, enter quietly to not disrupt activities, and report the reason for tardiness to the lead instructor at the next break.
- Recruits will be ready and seated immediately prior to class.
- Upon command or when an instructor and/or visitor enters the classroom or lab for the first time each class period, the first recruit to recognize their entry will announce to the class “to your feet,” and all recruits will immediately stand at attention, facing the front of the room to provide the proper respect to the instructor and/or visitor until directed. This does not apply if the class is in the process of taking an exam or for individuals participating in simulated patient care in lab.
- To ask questions, recruits shall raise their hand, wait to be acknowledged, and then stand and ask their question.
- When answering questions, recruits shall stand and respond.
- Cellular phones and other devices must be turned to silent mode or turned off. Calls/messages should be answered/sent only during breaks. For emergency calls/messages, recruits must excuse themselves from the room prior to answering/responding. Recruits using their devices instead of paying attention in class or disrupting class may be dismissed and considered absent.
- Audio/video recording is only allowed with instructor permission. No recording devices are permitted during quizzes or testing.
- Use of technology is encouraged but should be used for educational purposes only during class.
- Images displayed on devices must be appropriate and non-offensive.
- Recruits must be prepared with all needed materials.
- Recruits must refrain from side conversations and noisy or disruptive activities. Disruptive recruits may be dismissed and considered absent.
- Regular breaks will be given. Recruits needing to leave at another time should do so quietly.
- Smoking, tobacco, and smokeless/electronic nicotine device use is prohibited always while in uniform and whenever/wherever otherwise prohibited.
- No food is allowed in classrooms or labs. No gum chewing is allowed when in the lab as that is a simulation of the clinical/field setting.
- Covered drinks are allowed in H Building classrooms and the classroom portion of the labs if they are cleaned up. Drinks may or may not be allowed in classrooms in other campus buildings.

- Facility equipment is for faculty/staff use only.
- Recruits may not enter faculty/staff offices or areas without permission.
- The EMS equipment storeroom is NOT to be used as a hallway.
- Greet all faculty/staff, agency representatives, and visitors that approach you and help as needed.
- Recruits shall not gather in doorways, hallways, entranceways or other thoroughfares at any time and shall not impeded the movement of staff members, recruits or other persons.
- When non-students approach an area where recruits are present, recruits shall stand, give the signal “gangway,” and stand aside to clear a path for the person(s) to pass unless directed otherwise.
- Recruits must understand there are offices and classrooms right off the hallways and shall avoid excessive noise.
- Profanity, vulgarity, and racial, ethnic, or sexist statements are prohibited.
- Recruits must respect physical property (push chairs in, clean up, keep feet on the floor). Recruits will be responsible for the cleanliness of classrooms and labs, and all recruits will participate in assigned cleaning details.
- Recruits may NOT sit on tables.
- Recruits may NOT sleep in class. Tired recruits may stand in the back or on the sides of the room if needed.
- While participating in lab, all recruits are expected to be on their feet and actively participating in some form of training activity. Sitting down, unless completing Fisdap documentation, other assignments, or otherwise instructed to do so by an instructor, will be considered unacceptable behavior and dealt with accordingly.
- For lab and “on duty” squads, recruits must have all required equipment with them: black pen, watch the displays seconds, eye protection, stethoscope, trauma shears, reflective vest, and any documents/references needed.
- When working on campus roads or parking lots, recruits must wear their required safety vests.
- Instructors or the Program Director may remove any recruit violating the rules, being disruptive, or compromising safety. The recruit will remain excluded until the issue is resolved with all parties involved.
- Personnel accountability tags (PATs), like those used by fire rescue agencies will be used to track attendance. Recruits should always have their two (2) PATs with them for all class-related functions including field experience shifts. The only exception where PATs will not be used will be hospital clinical rotations.

Clinical Sites & Field Experience/Internship Stations

- Arrive early, and remain for the full duration of the scheduled shift.
- Use of technology may be permitted if allowed by the clinical/field affiliate and Clinical Coordinator. All use should be education-related and all images visible must be appropriate and non-offensive.
- Recruits must have all required equipment with them: black pen, watch the displays seconds, eye protection, stethoscope, trauma shears, reflective vest (field only), and any documents/references needed.

- Recruits may not leave clinical/field sites for any reason during their shift. Exceptions for special circumstances requires Program Director or Clinical Coordinator approval.
- No food or gum chewing in clinical areas.
- Covered drinks may be permitted if allowed by the clinical/field affiliate and Clinical Coordinator.
- Recruits are accountable to clinical site- and field station-specific rules and expectations.
- All assigned patient care and site documentation related to that care (i.e., documentation for the site in the patient's medical records, not the documentation the Program requires) must be completed prior to leaving a clinical unit or field site.
- Evaluation forms must be fully completed for every shift, and the recruit must ensure the respective clinical educator, nurse, or preceptor signs off on the evaluations prior to leaving. Unsigned forms will not be accepted as proof of attendance.
- While not the primary focus, recruits should help staff with ancillary duties during their shifts.
- In the clinical setting, recruits may NOT take verbal or telephone orders, answer telemetry radios/telephones, discharge patients or given medical information to patients or families, apply splint or cast material, or measure crutches.
- Recruits are not to be in staff/EMS lounges unless directed to do so.
- Recruits should not take any articles from the site.
- Recruits attending OR/anesthesia rotations have additional requirements. Recruits will receive an orientation both in the IRSC Surgical Technology lab and onsite by site staff.
- While at a fire station, recruits should not be sitting in recliners, watching television or sleeping during working hours.
- Recruits may sleep on overnight shifts during the same times their preceptors may.
- Recruits may be invited to eat with field crews but must offer to pay their share of the meal cost and help with cleanup.
- Recruits must follow the chain of command in place at the clinical/field site.

Fraternization

Interactions between faculty and students at Indian River State College are guided by mutual trust, confidence, and professional ethics. Professional faculty/student relationships have a power differential and carry risks of conflicts of interest, breach of trust, abuse of power, and breach of professional ethics.

Fraternization is a social or business relationship between students and instructors or clinical supervisors and supervising paramedics, which has the potential to impact adversely on a student's ability to learn in a safe, collegial environment, on classroom order and discipline, and on the reputation of the Program. It also has the potential to degrade the positive and trusting relationships between students and faculty.

Some possible examples of activities encompassed by the broad term "fraternization" include but are not limited to:

- Social activities not sponsored by the Program or College
- Going to private homes or clubs together
- Social networking such as Facebook
- “Consensual relationships” including dating, romantic, sexual, or marriage relationships

All Program faculty and staff will maintain the highest level of professionalism, and unquestionable integrity, always while engaged in IRSC activities.

Factors, concerning fraternization with instructors, include whether the student’s conduct has:

- Compromised the chain of command
- Resulted in the appearance of partiality
- Undermined good order, discipline, authority, or morale
- Damaged the ability of the program to accomplish its mission

The actions and circumstances must be such as to lead a reasonable person experienced in the problems of leadership to conclude that the good order and discipline of the program has been prejudiced by their tendencies.

Therefore, all interactions with instructors should be confined to Program-related activities, at Program-approved locations, for the full duration of the student’s enrollment. Instructor-involved study groups and assistance labs will only be permitted on campus. Fire rescue study sites may be approved by the Program Director.

Non-college social networking (Facebook, Twitter, etc.) connections may also be considered fraternization and should be avoided.

The student is expected to provide full disclosure of any outside relationship with an instructor, regardless of nature (e.g., coworker, business, neighbor, prior relationship, etc.). Note that existence of these relationships does not in and of themselves constitute fraternization, but each must be evaluated on a case-by-case basis. Students are also expected to immediately report any direct awareness of another student’s inappropriate behavior to the Program Director.

Conflict Resolution

The Program recognizes that recruits will, from time to time, encounter disheartening, unpleasant, and occasionally hostile situations. These situations may stem from interaction between individuals or groups of other recruits, faculty, clinical or field preceptors or sites, the public, or the witnessing of emotionally traumatic events. While the Program cannot protect recruits from the dangers and harsh realities of the world that are encountered on clinical and field rotations, we will make every effort to give the recruit the knowledge and skills necessary to protect themselves. The recruit must take the responsibility to use these tools at the appropriate time. This includes situations in which the language, attitude, and behavior of other recruits, clinical personnel, and program faculty may innocently or maliciously be offensive or derogatory based on race, religion, gender, ethnic background, national origin, age, veteran status, disability, or sexual orientation. The first step in any of these cases is to notify the

involved party of the offense. Should the offensive behavior continue, the recruit should notify the next person up the Chain of Command, as delineated below. In the best interest of all parties involved, recruits enrolled within the Program must abide by the following procedures, notwithstanding the recruit's grievance rights as set forth by IRSC policy in the Student Handbook.

The Program expects recruit conflicts to be handled between the parties involved. If the situation cannot be resolved peaceably between the individuals or groups, the course/program lead instructor or Program Director should be notified. The situation will be corrected following Program policies, grading criteria, instructional intent, and course objectives.

Program-Level Grievance Mechanism

If a situation arises in which a recruit feels that Program policies have not been followed or that he/she has been dealt with in an unfair or inappropriate manner, he/she must pursue the following grievance mechanism. The recruit, and not an intermediary, must pursue the grievance. This procedure must always be followed and no step of the procedure may be circumvented. Resolution of issues involves obtaining information regarding the situation and adherence to appropriate policies and procedures. The recruit will be dealt with fairly, impartially, and without bias.

1. Discuss the matter directly with the individual involved, if possible.
2. If the grievance is not resolved in Step 1, discuss the matter with the lead course instructor. If the problem occurred at a clinical or field site, the recruit should discuss the situation first with the clinical educator, if applicable, and if not resolved, with the lead course instructor.
3. If the grievance is not resolved in Step 2, discuss the matter with the Program Director. Depending on the circumstances, the Program Director may choose to involve the Program Medical Director.
4. If the grievance is not resolved in Step 3, the recruit has 24 hours to request a hearing, in writing, with a three (3) member panel of the EMS Advisory Committee made up of representatives from Treasure Coast fire rescue agencies and hospitals. The request must be legible, include both the recruit's RiverMail address and a phone number where the recruit can be reached, and signed by the recruit. The Program will make every effort to convene the panel within 72 hours after receipt of the request, dependent on panel member availability.
5. If the grievance is not resolved in Step 4, the recruit may request the dean to review the case. The request should be made in writing to the dean's administrative assistant.

Required Program Materials

Failure to have all required materials by the first class session may result in the recruit being dismissed from his/her course and/or program of study unless the materials are not available or specific arrangements have been made with Program faculty.

Attendance

Attendance during all phases of a program of study is extremely important.

General Attendance

- Attendance during all phases of a program of study is critical.
- Attendance will be part of the affective evaluation of each recruit.
- Semester-long or longer EMS programs have mandatory orientation sessions held prior to the start of the program. Failure to attend may result in the recruit being dropped from the program.
- Missing the first class session of a course without notifying the lead instructor may result in withdrawal from the course and/or program of study.
- Certification courses (i.e., ACLS, PALS, PHTLS) have specific attendance requirements that will also apply when incorporated as part of a program's requirements.
- All absences and tardiness require advance notification of at least one (1) hour unless the cause occurs within that hour.
- For classroom/lab absences and tardies, academy recruits must notify their squad leaders, and squad leaders (or recruits that are not assigned to a squad) must notify their lead instructor.
- Failure to make proper notification will be considered a non-permitted absence.
- Absence occurrences exceeding permitted limits in any combination of program courses may result in administrative probation for the program or dismissal from the program.
- Tardiness is based on scheduled start time, including returning from breaks and lunch. Early departure prior to scheduled end time is treated the same. Tardiness of 60 minutes or more is treated as an absence.
- Absences directly related to obtaining a career position related to EMS (e.g., mandatory testing dates) may not be counted against maximum accepted absence limits provided the recruit notifies his/her Lead Instructor in advance and provides official documentation from the employer of the requirement in writing or electronically. Post-hire orientation for such a position will be evaluated on a case-by-case basis. This possible exception will not apply if the recruit has an option to complete the requirement on a non-class day.
- Other exceptions (e.g., jury duty, death of an immediate family member) will be considered on a case-by-case basis with notification and documentation.
- Program faculty may send a recruit home if the recruit is too ill to perform or poses a hazard.
- Recruits are accountable for all material covered during their absence.

Clinical Shift Attendance

- Recruits should arrive at least fifteen (15) minutes prior to the start of their shift and report to their clinical preceptor (Program clinical educator or clinical site personnel). Documentation of arrival and departure times must be verified by the clinical preceptor.

- Tardiness may require additional remediation. Tardiness of thirty (30) minutes or more may result in cancellation of the shift and will be treated as an absence. Recruits must **immediately** make notification to the Program if this occurs.
- All absences and tardiness require advance notification to the Program of at least one (1) hour unless the cause occurs within that hour. For group clinicals, that notification should be made via their clinical officer or squad leader.
- Absences may result in an Incomplete or Unsatisfactory grade and an inability to complete the program with the recruit's cohort
- Clinical sites have the right to refuse entry to any tardy recruit or send ill recruits home. Recruits must **immediately** contact their lead instructor if this happens.
- All clinical hours are required and will require enrollment in a special course at the recruit's expense to make up any hours missed. Since all co-requisite courses must be passed together, if the recruit is enrolled in additional co-requisite courses and fails to successfully complete those courses, the recruit will be withdrawn from the program instead and will not be required to make up the missed hours.

Field Shift Attendance

- Recruits should arrive at least fifteen (15) minutes prior to the start of their shift and report to their assigned supervising paramedic and/or station officer. Documentation of arrival and departure times must be verified by the supervising paramedic.
- Tardiness will result in cancellation of the shift and will be treated as an absence. Recruits must **immediately** make notification to the Program if this occurs.
- If no preceptors are available on the ambulance at the assigned station, the station officer should arrange for station reassignment. The Program must be notified no less than one (1) hour after relocation or the shift will be considered unauthorized and no contacts/skills from the shift will count
- Occasionally the station officer may arrange for station reassignment due to conflicts. The Program must be notified no less than one (1) hour after relocation or the shift will be considered unauthorized and no contacts/skills from the shift will count.
- No more than one (1) EMS recruit may be at the same station, even if there are multiple preceptors, unless there are multiple staffed ambulances and the agency permits it. This includes recruits or individuals from other fire and EMS programs unless those other recruits are not riding on the ambulance (i.e., riding with the engine crew) and the agency permits it.
- All absences and tardiness require advance notification to the Program of at least one (1) hour unless the cause occurs within that hour in which case immediate notification must be made.
- Field sites have the right to send ill recruits home. Recruits must **immediately** contact the Program if this happens.
- All field hours are required and will require enrollment in a special course at the recruit's expense to make up any hours missed. Since all co-requisite courses must be passed together, if the recruit is enrolled in additional co-requisite courses and fails to successfully complete those courses, the recruit will be withdrawn from the program instead and will not be required to make up the missed hours.

Grading

Each individual course syllabus will list the specific grading criteria for that course including but not limited to percentage breakdowns for different assignments, whether certain assignments will be graded as pass/fail, and minimum scores required to successfully complete the course as well as requirements for submission of assignments and late work. The following are intended as general guidelines on grading policies for the Program.

The Program uses the following letter grade system:

- A 100-90
- B 89-80
- C 79-70
- D 69-60
- F <60

The recruit must complete each course in the curriculum with a C or better (or S in S/U graded courses) as well as all other course requirements to remain in and graduate from the program. Failure to meet this standard will result in the recruit being withdrawn from the program of study.

Minimum passing scores for nationally accredited programs/exams may be higher than general Program minimums. Nationally accredited exams are designed to assess knowledge in specific areas of study, including: Basic Life Support for Healthcare Providers (BLS), Advanced Cardiac Life Support (ACLS), Pediatric Advanced Life Support (PALS), Prehospital Trauma Life Support (PHTLS), and Pediatric Education for Prehospital Professionals (PEPP). Exams have minimum scores that are recognized nationally that are usually higher than the Program's standard minimum passing score. When these courses are included in a program, recruits must pass these tests per the requirements set forth by the sponsoring agencies, and all recruits must participate in the courses and successfully pass the courses to remain in the program. This is true regardless of whether the recruit has or has had previous certification in any of these respective courses.

Satisfactory Academic Progress

The Program is committed to seeing recruits succeed in their academic endeavors. Program recruits are expected to make satisfactory progress in their program, which includes demonstration of academic (didactic and clinical) competencies as well as consistent demonstration of professional and ethical behavior. Any recruit can request additional assistance at any time. Success of any recruit depends on the voluntary, dedicated, and cooperative effort of the recruit. It is the recruit's responsibility to make arrangement with their instructors for additional assistance or remediation.

The Program is a competency-based program and is designed in such a way that initial material presented serves as a foundation for subsequent learning. Classroom activities lay a foundation of basic knowledge for clinical and field activities. For this reason, each recruit must

satisfactorily complete each component of the curriculum in the specified sequence before moving on to the next.

The instructor or Program Director may require recruits to attend progress conferences during a program to review recruit grades and performance.

Any recruit who is failing to maintain satisfactory academic progress or demonstrate necessary competencies will be counseled to determine the cause/reasons for poor academic performance and attempt to develop a remediation or individualized education plan that will enable the recruit to become successful in his/her academic activities. Continued unsatisfactory performance may result in the recruit being placed on academic probation.

Faculty supervising a recruit's remediation may:

- Work independently with the recruit in class, on breaks, or outside normal class hours
- Assign outside studies or practice
- Assign the recruit to a peer study group, approved tutor, or the Academic Support Center
- Assign a fellow recruit that has demonstrated an above average proficiency in the area needed for remediation to assist the recruit
- Encourage the recruit to take advantage of any other resources available

To complete a semester-long program or to progress to the next level or complete a longer program requires achieving a grade of C or better (or S in S/U graded courses) as well as completing all other course requirements for all program courses each semester. Failure to do so will result in withdrawal from the course and/or program of study. Recruits must reapply to the Program and repeat all Program courses from the semester of withdrawal.

Classroom Skills Practice

During these programs, recruits will be taught skills necessary for the assessment and management of patients in emergency situations. The College and Program have made a significant investment in both low and high fidelity simulators, but it is still essential that recruits practice and perfect these skills using human subjects. **All recruits are hereby advised that the practice of both non-invasive and invasive skills will be practiced on classmates of both sexes, and that classmates of both sexes will be practicing these same skills on each other.** The purpose of these practice sessions is to develop the tasks, dexterity, and tactile feel necessary for each skill, in situations as real as possible, under the control and supervision of program instructors. The practice of these skills will involve limited physical contact with all areas of the human body including the areas of the chest and pelvis. No skills requiring the exposure of genitalia, buttocks, or uncovered female breasts will be performed in the skills lab unless an external standardized patient is brought in to participate in that activity.

The Program is acutely aware of both the importance of hands-on human practice and the risk of inappropriate behavior. All recruits involved in these skills practice sessions, in the role of the rescuer, the patient, or as an observer, are expected to display tact and professionalism, as well as behave under ethical and legal guidelines.

At any time, should a recruit believe that the practice of a skill places her or himself in an uncomfortable position, that recruit has the responsibility to make that belief known to the instructor prior to beginning the skills practice.

At any time, should a recruit believe that the practice of a skill on themselves by another recruit or as demonstrated by an instructor crosses a line of professionalism into overt sexual contact, that recruit has the responsibility to make that belief known to both the recruit or instructor involved and to the lead instructor or Program Director as soon as possible. Any recruit who perceives that he or she has been treated in a discriminative or otherwise inappropriate manner on the grounds of gender may consult with or file a written complaint with the Program Director.

Specific skills which will be practiced in this program, and which may involve practice in or around the chest or pelvis include, but may not be limited to:

- Splinting
- Traction Splinting
- Foreign Body Airway Obstruction
- Patient Assessment/Physical Exam
- Blood Pressure by Auscultation
- Blood Pressure by Palpation
- Dressing and Bandaging
- Auscultation of Breath/Heart Sounds
- Assessment of Pulse & Respirations
- Application of ECG Electrodes
- Application of 12-Lead Electrodes
- Supine Spinal Immobilization
- Seated Spinal Immobilization
- Medication Administration

The practice of skills is an essential part of the EMS Program. Recruits must come to laboratory sessions fully prepared to practice skills and scenarios. Being prepared includes being in proper attire and having the appropriate equipment ready and available. Additionally, scenario practice requires an attitude and demeanor that do not detract from the scenario created. Remaining “in character,” communicating with the “patient” as if a real patient, and performing all skills as appropriate, following procedures step-by-step.

Failure to have all required equipment available for the skills practice session may prevent the recruit from remaining for the skill practice session.

Invasive Skills

Only invasive skills approved in curriculum may be performed in the theory, lab, clinical, or field phases of a course/program. Invasive skills are defined as any skill in which the surface of the skin is penetrated (e.g., subcutaneous injections, intramuscular injections, intravenous access, intraosseus access) or any time a device is inserted into a body orifice (e.g., insertion of oral or nasal pharyngeal airways, nasogastric tube insertion, endotracheal intubation, urinary catheterization).

Invasive procedures must be done in compliance with the following guidelines:

- The recruit performing the procedure must be directly observed by an approved instructor.

- Invasive procedures may only be practiced in the classroom on other Program recruits or faculty.
- The recruit must use approved techniques as outlines in the curriculum and skills sheets.
- Any variation of approved techniques will require the recruit to start the procedure over again.
- Labs must be set up in such a manner that no other recruits can approach or interrupt the recruit performing the skill and the instructor observing the skill.
- All exposure control policies must be followed including appropriate disposal of contaminated waste and sharps.
- No skills requiring the exposure of genitalia, buttocks, or female breasts will be performed in the skills lab unless an external standardized patient is brought in to participate in that activity.

Safety

- Safety is everyone's responsibility.
- Recruits may not perform skills unless supervised in the lab, clinical and field settings.
- Recruits must follow instructor directions and ask for clarification if not understood.
- Proper body substance isolation procedures should be followed, even during simulation.
- Recruits should be able to lift 125 pounds while employing proper lifting techniques.
- Vehicle safety belts must be worn always unless immediate patient care prevents it.
- Recruits may not drive emergency vehicles during field shifts.
- Recruits may not participate in the hot loading (i.e., rotors in motion) of a helicopter patient.
- Recruits may not participate in any activity requiring additional safety equipment that they do not possess (i.e., vehicle extrication).
- Participation by recruits who have a communicable disease or are carriers of a chronic communicable disease will be evaluated on a case-by-case basis by the Program Director, Medical Director, and Health & Wellness office personnel.
- Recruits must report any prescription medication use to their lead instructor and Program Director if the medication could impair judgment or their ability to practice. Failure to do so may result in dismissal from the course and/or program of study.
- A recruit may be required to have a medical "Return to Work" clearance before being allowed to return to class for situations including, but not limited to, absence from three or more consecutive classes, history of chronic health problems, pregnancy, surgery, or injury.
- Monitor/defibrillators used by the Program are operated only for training purposes but are fully operational units capable of delivering electrical charges up to 360 joules, which can be fatal. **ANY PURPOSEFUL DISCHARGE OUTSIDE OF INSTRUCTOR-LED PRACTICE SHALL RESULT IN AN IMMEDIATE DISMISSAL FROM THE PROGRAM OF STUDY.**
- Supervising faculty and preceptors have complete authority over the recruit during his/her training. Failure to follow instructions, performing actions that have not been authorized, or violating any other safety standard may result in disciplinary action up to and including dismissal from the program of study.

Expectation Recruits Study Outside of Class

- Program recruits are college students, and the programs offered are demanding, high-credit, college-level programs.
- Recruits should carefully evaluate whether they can academically manage taking non-program courses while enrolled in the Program.
- Employment is permitted while enrolled in Program courses; however, total time commitments must be carefully evaluated. Job-related responsibilities are not grounds for excusable absences or tardies.
- Recruits will need to put in a considerable amount of study/preparation/documentation time outside of class. The estimate of minimum weekly hours required for EMT is 60 hours and for paramedic is 90 hours

Voluntary Withdrawal from the Program

- Withdrawal is a permanent step taken by the recruit who no longer wishes to continue in the EMS Program.
- Recruits may withdraw at any time by contacting their academic advisor.
- Recruits should also notify the Program Director in writing including their reason for withdrawal.
- Notification by the College that a recruit has dropped a required course will be considered voluntary withdrawal from the program of study.
- Recruits who withdraw are not guaranteed reentry to the program of study. Those seeking reentry to the Program must reapply and meet the entrance and all other Program requirements in place at that time.

Request for Incomplete Grade/Status

Requests for a grade of Incomplete (I) will be evaluated on a limited, case-by-case basis per Health Sciences and College policies. The requested incomplete grade is reserved for circumstances beyond the recruit's control, i.e., a serious illness. It is generally only granted if the recruit has completed at least seventy percent (75%) of a semester with a passing average and has provided acceptable evidence to the lead instructor.

Any recruit in a multi-semester program who receives an Incomplete from the Program and does not complete requirements prior to the cohort's next semester will be withdrawn from the program of study and are not guaranteed re-entry. If re-entry is desired, the recruit must apply for a position in a subsequent entering class, honoring all obligations and deadlines of the application process.

Permitted Skills during Clinicals and Field Experience/Internship

Recruits are expected to put their classroom-based knowledge to practical application in the clinical and field settings.

IRSC EMS recruits practice under the license of the Program Medical Director. A recruit may, under the direct supervision of qualified clinical supervisors or supervising paramedics, perform any skill that has been taught and for which the recruit has been successfully tested and cleared on within the didactic/lab phase of the program, as evidenced by a skills verification card that the recruit must have with him/her. **Recruits may not perform any skill prior to having demonstrated proficiency in that skill in the didactic/lab setting and being signed off to perform that skill in the clinical/field setting.**

Any recruit whose clinical performance is deemed unsafe or inappropriate will be removed from the clinical setting and required to remediate his/her skills and practice in the lab setting prior to being allowed to return to the clinical setting.

By State law, outside of scheduled Program clinical and field shifts, recruits may not perform any skill for which they are not already licensed and authorized to perform at their current licensure level.

Recruits who are asked to perform skills that fall outside of the parameters of their scope of practice or that conflict with policies in this manual must decline to do so.

Guests

Recruits are not allowed to bring guests, family members, children, or others into the classroom or lab areas prior approval by the lead instructor and/or Program Director.

Inclement Weather

The Program follows the College's procedures relative to cancelling classes due to inclement weather.

As EMS is a profession that works in all weather conditions, lab sessions may be held in adverse weather conditions (i.e., rain, cold, wind). Recruits will not be intentionally exposed to dangerous weather conditions (i.e., lightning), and any outdoor activities will be immediately terminated if those conditions form.

If a recruit is scheduled for a clinical or field shift and the College closes due to inclement weather, the recruit may still attend that shift; however, he/she is not required to do so. If electing to not attend, the recruit must notify the site and their lead instructor that they will absent due to the College closure for inclement weather. This absence will not count against the recruit; however, the recruit will be required to reschedule the shift.

Program Evaluations

As part of the Program's continuous improvement efforts and requirements of its regulatory and accrediting organizations, the Program may ask recruits to complete evaluation forms on a range of Program activities at different times throughout and after completing the program. These evaluations are an important source of feedback for the Program's evaluators and faculty. The

evaluation forms provide recruits with an opportunity to anonymously express concerns they may have about Program activities. When evaluation forms are distributed, recruits are asked to complete and return them immediately. Recruits are asked to rate each category as accurately as possible, writing constructive feedback as needed in spaced provided. Recruits are not to remove evaluation forms from the classroom unless otherwise directed. These evaluations will have no effect on a recruit's grade, progress, or status with the Program.

Lab, Clinical & Field Shift Scheduling & Data Entry

- All lab, clinical and field scheduling is done thru the online scheduling program Fisdap, either directly or through the lead instructors.
- Schedule changes are restricted due to the requirements of the Program's affiliation agreements with the clinical and field sites.
- Each cohort will be provided with a scheduling window during which they may schedule shifts. These windows will be listed in individual course syllabi.
- Recruits are responsible for all shifts for which they sign up and/or appear on their Fisdap schedules.
- Shifts are NOT authorized unless they appear on the Fisdap schedule. Any contacts and skills completed during a non-authorized shift will not count and may expose the recruit to Program discipline.
- All schedule changes for shifts in Fisdap must be processed thru Fisdap.
- All skills and scenarios from lab must be entered and signed off prior to leaving lab unless otherwise directed by the lead lab instructor.
- All skills, scenarios, and patient contacts from lab, clinical, and field shifts must be logged using Fisdap within 72 hours of the end of the shift. Only skills, scenarios, and contacts logged using Fisdap and signed off will count toward Program requirements. Entries will be audited by Program faculty for compliance and accuracy.
- Recruits must attach a clear and legible image of the entire front and back of all fully-completed and signed paper shift documentation to the respective shift in Fisdap. This image may also then be used as a sign off where the preceptor is not able to access the shift or patients in Fisdap directly. Alternatively, a preceptor may sign off on each patient on a shift directly within Fisdap using their username and password in which case attaching paper documentation would be optional; however, this sign-off will result in the patient entry being locked and non-editable by the recruit.
- When data entry is completed, recruits must lock their shifts.
- Shifts that are not completed and locked within 72 hours of the end of the shift will lock automatically. Shift without proper documentation in Fisdap by that 72-hour deadline will not count toward Program requirements and will be marked as an absence.
- Program staff will NOT unlock shifts for data entry after the 72-hour window unless Fisdap Technical Support was contacted and provided documentation that there was a systems issue. If that situation does exist, recruits will be allowed 24 hours to complete documentation and relock the shift. Shifts that are not relocked will be locked by the Program. If unable to do so due to missing information, the entry that is causing the conflict will be deleted and not counted.

Technical Support Issues

The Program uses many computer-based and online resources (e.g., Blackboard, Navigate, Fisdap). Recruits who experience issues with these systems must contact the Technical Support for these systems directly to resolve them, not Program faculty and staff. Recruits should work to complete assignments and tasks early. Waiting until near may leave insufficient time to reach support and result in missed deadlines and their related consequences.

Patient Confidentiality

Recruits will be required to document their clinical practice, including patient assessments and field run reports. No patient identifiable information should be included in that documentation. Any patient medication lists, ECGs, or other supporting documentation submitted should not contain any patient identifiable information.

Recruits should **NEVER** make copies of any hospital or EMS patient charts or records, irrelevant of whether they participated in the care of the patient. Absolutely **NO** photography is permitted for any reason during hospital or field shifts. Violation of patient confidentiality in these or any other ways is grounds for immediate dismissal from the program of study.

Maintenance of Certifications & Ability to Produce on Demand

To participate in any EMS program or course, recruits must possess and maintain certification in healthcare provider-level CPR from the American Heart Association. This certification must have an expiration date on or after the last day of the program or course.

To participate in the Paramedic program, recruits must also possess and maintain Florida certification/licensure as an Emergency Medical Technician.

Additionally, State regulation requires healthcare personnel, including EMS personnel, to be able to produce evidence of their certification on demand. For this reason, the Program requires recruits carry either originals or copies of their CPR cards, and in the case of paramedics, their EMT licenses, on their persons always while in class, lab, clinical, or field. Failure to be able to produce these documents on demand is grounds for dismissal from the class or shift with all applicable rules in effect.

Admission to Clinical & Field Sites

Both the EMT and Paramedic programs of study require both clinical and field shifts. These are done with sites with which the College and Program have affiliation agreements. Prior to being allowed to participate in clinical and field shifts, recruits must fulfill all requirements set forth in the affiliation agreements or by affiliate policy (e.g., physical exams showing adequate health, proper immunizations, background checks, site-specific paperwork).

These sites retain the right to refuse admission to or request removal of recruits for any reason. If this occurs, and it is not for a reason that would otherwise result in the dismissal of the recruit

from the program of study, the Program will attempt to reassign the recruit to a different site. If the recruit cannot be reassigned, the recruit will not be able to complete his/her program of study and will be withdrawn from the program of study.

Medical Director Approval to Practice

Recruits are granted the privilege to practice by the Program Medical Director as an extension of his/her medical license, as provided for under State statute and regulation. If at any time, whether it be classroom, lab, clinical, or field, the Medical Director loses confidence in a recruit's ability to behave professionally and with integrity or to operate safely in the profession, the Medical Director may suspend that privilege. The recruit's continued participation in the Program will be reviewed by the Program Director and Program Medical Director in consultation with the Dean of Health Sciences or his/her designee and other faculty or individuals as needed.

Eligibility to Participate in Final Exams

Florida Department of Health and National Registry of Emergency Medical Technicians rules and regulations require that final exams be conducted after all program requirements have been met. No recruit will be allowed to participate in any final exams unless they have completed all other course or program requirements have been completed.

Certification of Terminal Competence

Prior to graduating from the Program, the Program Medical Director must certify that each graduate has successfully completed all phases of the Program and is proficient in basic and/or advanced life support techniques as applicable by Section 401.2701, Florida Statutes.

Additionally, CAAHEP requires the Program Director and Program Medical Director to certify that each Paramedic Program graduate has successfully completed all of the terminal competencies required for graduation from the Program as a minimally competent, entry-level paramedic and is eligible for State or national certification examinations in accordance with established Program policies.

Contact with Law Enforcement

Any EMS recruit who has any contact with a law enforcement agency related to a criminal issue must report the incident, in writing, to the Program Director within 24 hours. Failure to report the incident as noted may result in immediately withdrawal from the course and/or program of study. Examples of law enforcement contact may include, but not be limited to:

- Traffic stops (if a citation or documented warning was issued)
- Traffic accidents
- Warrants or arrest

Any arrest and/or charges for which a corresponding conviction would otherwise preclude participation in the program will result in an immediate suspension from the program until the charges are resolved and the recruit's criminal background is reevaluated. The recruit will be given the option of an Incomplete, instructor withdrawal, or student withdrawal.

Use of Photography and Recordings

The Program may, at times, use photographs, photographic images, names, audio recordings, and/or video recordings of employees and recruits for purposes of general publicity; recruit/employee recruitment in publications, public relations, promotions, publicity and advertising; or for educational review. The Program will obtain optional photography/recording releases from all recruits.

Anyone requesting to opt out of being photographed/recorded is responsible for removing himself/herself from the area in which the photographing/recording is occurring, or notifying the camera person on site of his/her opt out status. Failure to do so may result in the individual's inclusion in a photograph or recording and will be treated as a release, allowing the Program to utilize that photograph or recording accordingly.

Program Hiatus/Readmission/Transfer

Any recruit failing to successfully complete a semester-long course of study or the first semester of a longer program must reapply to the Program following the standard application process.

Recruits seeking readmission to a subsequent semester of a program that lasts more than a semester will be considered for readmission or transfer based on:

1. Completion of readmission form and date of application
2. Documentation of any required remediation
3. Completion of current course pre-requisites
4. Completion of all current program entrance requirements (i.e., health requirements, current CPR card, updated drug and criminal background check, updated history and physical if recruit will not complete the program within one year from the date of the original physical)
5. Documentation of minimum competencies for all previous program courses (lab fee may apply)
6. Any other current Program requirements

Recruits who have failed or been withdrawn from the program of study due to placing the health and safety of patients in jeopardy within the clinical or field settings, or for serious safety violations in the lab setting, will not be admitted/readmitted into the Program.

Any recruit who has been out of EMS courses for more than one (1) year or who is unable to complete the total program within two (2) academic years from their initial enrollment may be required to restart the program from the beginning unless granted an exception by the Program Director. All recruits who are out of the program for six (6) months or longer or are seeking

readmission following a Program curriculum change from the curriculum under which the recruit previously studied will be required to pass competency assessments before readmission.

Any recruit readmitted to the Program will be subject to all current Program requirements.

The program is unable to accept transfer students due to accreditation limitations.