



Northwest Community Healthcare
EMT PROGRAM STUDENT HANDBOOK
Spring Semester 2019

The student, by virtue of applying for or accepting a position in the class, assumes the responsibility to conform to all applicable governmental laws, regulations, ordinances, policies, procedures, and protocols governing citizen conduct as well as those addressing students and licensed Emergency Medical Services (EMS) personnel including all Federal, state, local and program requirements.

These standards of conduct apply to

- *applicants who become students, for offenses committed as part of the application process;*
- *applicants who become students, for offenses committed on the Northwest Community Healthcare (NCH) campus and/or while participating in program related events or activities that take place following a student's submittal of the application throughout his or her official enrollment; and former students for offenses committed while a student.*

The statements and requirements in this handbook have been reviewed and approved by me for this academic year.

Matthew T. Jordan, MD, FACEP
EMT Program Medical Director

EMT PROGRAM

Program Core Values

- **Integrity:** We are good stewards in doing the right things in the right ways.
- **Compassion:** We genuinely care about the well-being of people.
- **Commitment:** We are committed to those we serve and their individual needs are at the center of all decisions. This includes providing patient-centered, humanistic and value-based care.
- **Accountability**
- **Advancing Knowledge:** We are dedicated to professional development and the process of applying and sharing knowledge. Quality education and a continuously learning health system is fundamental to professional growth and clinical excellence.
- **Respect and Collaboration:** We leverage teamwork and partnerships to deliver optimal outcomes; treating everyone with dignity and respect.
- **Excellence:** We are committed providing an educational experience of exceptional quality, to academic achievement, exemplary service, and superior clinical practice, quality and safety. Customer satisfaction drives all processes.
- **Justice:** Fair and equitable due process for all
- **Citizenship:** The program conducts all business in adherence to applicable laws and its code of ethics.

Student Accountability

Each student must be aware of and meet the Harper College and the NCH Student Handbook requirements to successfully complete the program.

Accreditation

The Higher Learning Commission of the North Central Association of Colleges and Secondary Schools (NCA)
230 South LaSalle St., Suite 7-500; Chicago, IL 60604
(800) 621-7440

Illinois Dept. of Public Health Div. of EMS & Hwy Safety
500 E. Monroe, 8th Floor; Springfield, IL 62701
(217) 785-2080

Safe, inclusive campus environment Equal Opportunity Statement

NCH and Harper College do not discriminate on the basis of race, color, religion, gender, national origin, ancestry, age, marital status, sexual orientation, physical or mental disability or unfavorable discharge from military service as long as the individual is otherwise qualified to perform all the essential elements of a EMT's scope of practice and meets eligibility requirements for EMT licensure. For a full listing of the statutory references that support the program policies and for information on requesting accommodations under the Americans with Disabilities Act (ADA) and the discrimination complaint procedure, see the Harper

College Catalog and this Handbook.

Professional role of an EMT

An EMT is an allied health professional whose primary focus is to provide essential care and services as part of an EMS System. An EMT functions under medical oversight and is a key link between the out-of-hospital environment and the health care system.

EMT's possess complex knowledge and skills necessary to provide competent care and appropriate disposition to those seeking their assistance.

EMTs provide care using drugs, pharmacologics, equipment and supplies as authorized by the EMS Medical Director (EMS MD). The EMT's scope of practice is basic life support and may occur at the point of patient contact, enroute to or between health care facilities, or in other settings.

EMT's must demonstrate each competency within their scope of practice in a wide variety of environmental conditions and for patients of all ages. Care is based on an appropriate patient assessment, forming an accurate impression, and providing interventions designed to optimize health, mitigate or reverse the signs and symptoms of illness and injury and provide comfort to patients and family members.

EMT's must care for people with empathy and compassion, have an awareness of their abilities and limitations, and demonstrate transdisciplinary professionalism, strong inter-personal and communication skills, and a capacity for calm and reasoned judgment while under stress. They must blend multiple intelligences with common sense and be service oriented.

Our program of instruction

As the first EMS Resource Hospital in Illinois, NCH has been conducting EMT and paramedic education programs since 1972.

Instructional content and design is based on the National EMS Education Standards approved by the National Highway Traffic Safety Administration (NHTSA, 2009); the Illinois EMS Act and the Program Medical Director.

We have had a collaborative agreement with William Rainey Harper College for the EMT program since 2003. The Illinois Community College Board approved the Associate in Applied Sciences (AAS) degree in EMS at Harper College as a unit of instruction on Feb 21, 2003. On April 1, 2003, The Illinois Board of Higher Education authorized Harper to offer the AAS degree in EMS.

All students are dually enrolled at NCH and Harper College for the EMT certificate course. The program is offered during the fall, spring semesters and students are

batch registered by Harper College for the courses in each semester.

All didactic classes for the certificate program are held at NCH and taught by NCH faculty. Curricular materials are prepared and administered by NCH faculty. Clinical rotations are scheduled at hospitals that belong to the Northwest Community EMS System (NWC EMSS). Ambulance observation time is offered by private agencies within the NWC EMSS.

Students may exit the program after finishing the paramedic certificate or they may complete the full AAS degree.

Prerequisite:

EMS 110	EMT Education	9
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Paramedic CERTIFICATE Program	Credit hrs
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EMS 210	Preparatory (fall)	10
EMS 211	Med. Emerg I (fall)	5
EMS 217	Hospital Internship (fall)	2
EMS 212	Med. Emerg II (spring)	7
EMS 213	Trauma, special populations (spring)	6
EMS 218	Hospital Internship (spring)	1
EMS 215	Field Internship (spring)	4
EMS 216	Seminar (summer)	3

Total credit hours	38
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Required courses for the Associate in Applied Science (AAS) Emergency Medical Services Degree:

A grade of C or better in all BIO, EMS, (EMS 214 and EMS 215 with a grade of P), and NUR courses is required for all students.

BIO 160 Human Anatomy	4
BIO 161 Human Physiology	4
Electives ¹	4
ENG 101 Composition	3
NUR 210 Physical Assessment	2
SOC 101 ⁺ Introduction to Sociology	3
SPE 101 Fund. of Speech Communication	3

Total credit hours for AAS degree	70
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¹Electives: BIO 130, CHM 100, HSC 104, or HSC 213

⁺ This course meets the World Cultures and Diversity graduation requirement.

COURSE GOAL & OBJECTIVES

PHILOSOPHY of EDUCATION

"Education must not simply teach work - it must teach life" (DuBois). The NCH program strives to develop students on an intellectual and personal basis.

Education impacts learning by:

- improving verbal and quantitative skills;
- encouraging higher order thinking, and prompting intellectual flexibility;
- improving reflective judgment, and effective interpersonal communication.

Education also impacts attitudes and values by developing a more positive self-image, encouraging accountability and team interdependency, increasing the ability to cope effectively with change and ambiguity, and developing a structure for principled reasoning, moral judgment, and ethical behavior.

PRIMARY PROGRAM GOAL & Competencies

To prepare competent and compassionate entry level EMT's in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains.

COMPETENCIES to attain before graduation

Conceptual competence: The ability to understand the theoretical foundations of the profession.

Technical competence: Proficiency in safely performing psychomotor skills.

Contextual competence: The ability to understand how your practice fits within the greater whole of the healthcare continuum and the ability to use conceptual and technical skills in the right context, avoiding the "technical imperative".

Integrative competence: The ability to take all the other competencies and put them all together, melding theory and practice.

Adaptive competence: The ability to change with evolutions in medicine or modify the care of one patient based on changing clinical presentations.

GENERAL COURSE OBJECTIVES

Upon completion of the program, an EMT graduate will consistently demonstrate entry-level competency for each of the following without critical error:

- Assess scene safety and demonstrate effective situational awareness.
- Perform patient assessments using appropriate technique, sequence and timing; recognize alterations from health, set appropriate patient care priorities and coordinate their efforts with those of other agencies and practitioners.
- Communicate effectively orally and in writing with a sense of purpose and audience.
- Establish rapport with patients and significant others to meet emotional as well as physical needs.
- Provide care on a continuum of basic life support care within the guidelines prescribed by the EMS MD.
- Use quantitative and scientific reasoning to solve problems effectively.
- Think critically and apply these skills appropriately and in various situations.
- Characterize professional behaviors through actions, speech, communication and interactions with instructors, preceptors, peers, patients, public safety personnel, and members of the public.

Expected professional behaviors (See code of student conduct):

- Professional identity (appearance/personal hygiene)
- Acting ethically based on codes for the profession

- Scholarly concern for improvement
- Integrity, empathy, self-motivation, self-confidence, time management, teamwork and diplomacy, respect, patient advocacy, and careful delivery of EMS services.
- Be committed to life-long healthy living and well-being.

Students have a variety of preferred learning styles and the program diversifies educational methods to optimize objective achievement. Instructors may use lecture, instructor and student-led discussions, case studies, labs, role playing, and guided study to present content.

Educational methods are enhanced by the use of AV aids, student handouts, and published literature/texts.

TEXTBOOK: Needed by the first day of class:

Mistovich, Joseph J. and Karren, Keith J. (2018). Prehospital Emergency Care (11th edition). New York: Pearson Education. Several options are available.

ASSIGNMENTS:

- **Pre-class reading assignments:** Text chapters are listed on the Course Calendar. It is critical that students come prepared to participate in all learning activities.
- **Guided Study as required**

CODE of STUDENT CONDUCT

EMT students have the opportunity to participate in a worthy, honorable, and progressive profession. This opportunity is not without obligation. The profession's viability rests on the integrity and capability of its members. See page one for our Core Values.

Students will have exposure to diverse learning environments, including, but not limited to classroom, hospital, and out of hospital settings and must behave professionally in each.

Students must take responsibility for their own learning and conduct themselves at all times as practitioners who already have an EMT license.

We believe in uncompromising ethical behavior based on the standards and codes of professional conduct established by statute, rules, EMS organizations and Program policy.

We are dedicated to excellence as our performance standard. All services provided in the context of EMS care shall be delivered in a consistently superior manner. Working together, we will approach everything as an opportunity for continuous improvement.

Two classroom "norms" NOT honored here:

The norm of civil attitudes – which says it's OK if students only look like they're paying attention.

The norm of the consolidation of responsibility – which says that no matter how large the class, five to seven students will do most of the talking.

EXPECTED BEHAVIORS: Students shall

- comply with all statutes, rules, protocols and procedures that govern the program and EMS care.
- comply with Federal Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule requirements, and respect patients' autonomy, confidentiality and right to privacy.

Professional interpersonal skills:

- treat others with respect, civility, courtesy, and dignity and conduct self in a professional and cooperative manner at all times.
- work cooperatively and harmoniously with peers, preceptors, and educators.
- respect cultural differences and protect the rights, privileges, and beliefs of others.
- avoid threatening, profane, and/or abusive language or actions and refrain from verbal or written communication that defames any person or organization or would be considered harassment.
- address concerns or conflicts with associates in a direct, prompt, yet sensitive manner in an appropriate setting. If this fails, go through proper channels to appropriately resolve the conflict.

Strive toward academic and clinical excellence

- encourage and assist colleagues in the pursuit of excellence through approved team activities.
- practice ONLY within the scope of approved clinical privileges.
- adhere to the guidelines prescribed by the Program in completing all assignments and exams.
- report to class/clinical rotations on time and complete objectives by stated deadlines.
- **mitigate safety risks** by protecting self and others from exposure to foreseeable and preventable risks.

Violation of Code of Conduct

Whenever a student is alleged to have committed a violation of the student Code of Conduct while on hospital premises or at an activity, function or event sponsored or supervised by the program, an investigation will be conducted. If the allegation is sustained, disciplinary action and/or a corrective action plan will be imposed per Program and College policy. The conduct will be documented in the student's file. Discipline may also be imposed if student conduct off campus or on social media adversely affects the hospital, Program, or the College.

Examples include, but may not be limited to, proof that the person

- is guilty of fraud or deceit in procuring or attempting to procure admittance into the EMT program;
- has demonstrated a gross lack of integrity;
- has engaged in dishonorable, unethical or unprofessional conduct of a character likely to deceive, defraud or harm the public.

This may include actions that create the potential for harm through negligence or willfulness; providing patient care without proper preparation or authorization; lying, covering up or failing to report an error in the clinical setting; and falsification of any documents;

- has violated the handbooks, contracts, or behavioral agreements specific to the EMT program;
- has violated any law, ordinance, College or Program rule or regulation while enrolled as a student;
- is unfit for duty or nondecisional by reason of illness, drug/chemical use, or gross negligence;
- is found in possession of, or has used or distributed an illegal or controlled substance, or look-alike drug;
- is guilty of unauthorized and/or illegal possession, use or distribution of any alcoholic beverage or product;
- has presented to class impaired, intoxicated, under the influence and/or with the odor of drugs or alcohol on their person;
- has brought a weapon or explosive device of any kind to class or to a clinical area;
- is guilty of theft of property or services;
- is guilty of intentional or willful destruction of property;
- has abused College or hospital technology resources, or medical equipment;
- is guilty of assault and/or battery;

- is guilty of **academic dishonesty**: engaging in, assisting in, or condoning lying, cheating, plagiarism, furnishing unauthorized information, unauthorized collaboration, or other similar activities. A founded allegation of academic dishonesty may result in separation from the program on the first offense. Cheating on exams transcends more than social mores or professional ethics. It can negatively impact the quality of care rendered to a patient.

Examples of prohibited behaviors:

- Written information found on a student's person, clothing, skin, personal effects or property, book edges, notebook covers, etc. that could provide information about exam content
- Use of any outside source in violation of policy to obtain an answer on an exam
- Removal of an exam booklet from the testing site unless authorized by the instructor
- Audible noises, gestures, or body language used to alert others to exam answers
- Use of digital pens during exams

- is guilty of disruptive behavior and/or conduct, bullying, harassment, discrimination, or abuse that threatens the physical or mental well-being, health or safety of any individual.

Disruptive behavior is defined as student-initiated acts that range from tardiness to violence. It may consist of behavior that is argumentative, disrespectful, offensive, or threatening and may present itself physically, verbally, or psychologically. It has a negative impact in the learning environment and interferes with the learning activities of the perpetrator and other students. Examples include, but are not limited to the following:

- Has demonstrated insubordinate or inappropriate behavior towards any instructor or preceptor;
- Is guilty of disrupting the peace, the education process or related activity

JUST CULTURE / CORRECTIVE ACTION

The program encourages accountability and behaviors that reflect program values within a **culture of safety**.

Communication openness: Students are expected to report any misconduct, errors, or violation of policy to an Instructor or Program Director without fear of retribution. Students should speak up if they observe anything that may negatively impact themselves, peers, or patient care. They should feel free to respectfully question the decisions or actions of those with more authority.

Any student suspected of academic dishonesty or is alleged to have demonstrated behavior that is unprofessional, unethical, inappropriate, or illegal may be academically suspended pending an investigation.

If the allegations are sustained, the student or alleged wrong doer will receive corrective coaching, penalties or disciplinary action.

Corrective coaching is generally progressive and shall be communicated privately and delivered in a timely manner. Corrective action is generally intended to be a positive, non-punitive intervention that allows an individual time to correct an identified deviation from expected behavior. Personal coaching, a verbal warning, a written warning, a written reprimand, or a last chance agreement may precede suspension or dismissal. However, for more severe offenses, the disciplinary process may begin with suspension or expulsion. In each instance, it is to be fair, just, and proportionate to the seriousness of the offense.

Due process rights are specified in System Policy G1 Grievance Recourse Step 1: Request for Clarification; reporting complaints and D1 Due Process: Disciplinary Action and the Harper College Catalog/Student handbook.

Appeal policy: Students and faculty members have 24 hours from the time of an invoked **disciplinary** action to appeal the action taken against them. All appeals must be in writing (e-mail is acceptable) and addressed to Connie Mattera at cmattera@nch.org.

Recovery of damages/Restitution

If a student is found to have defaced or damaged hospital or another student's property, they will be assessed the cost for expenses incurred by the program or other parties resulting from the student's infraction. Such reimbursement may take the form of monetary payment or appropriate service to repair or otherwise compensate for damages to program property or equipment. Restitution may be imposed on any student who alone, or through group activities, participates in causing the damages or costs to the program. The student will not graduate until full restitution has been made.

HEALTH and CRIMINAL BACKGROUND CHECK REQUIREMENTS

It is the policy of NCH, including all of its subsidiaries and entities (NCH), that physical exams are performed prior to student engagement in the clinical units to ensure that they are fit to perform the duties essential to the job role with or without reasonable accommodation.

Further, NCH is committed to providing quality and safe care, which can be compromised if a practitioner is experiencing a health issue that is not being appropriately addressed. NCH is also committed to assisting a student to address health issues so they may practice safely and competently.

"Health issue" means any physical, mental, or emotional condition, including alcohol or substance abuse and use of prescription medications that could adversely affect an individual's ability to practice safely and competently. It also includes a contagious disease which could compromise patient safety or jeopardize other health care workers.

A **fitness evaluation** may be required at any time by the Program Medical Director if there is a question about the student's current ability to exercise clinical privileges safely and competently and perform the essential functions of their student privileges as applicable. It may also include assessment of infection risk, motor skills, cognitive ability and judgment or other issues which may adversely affect their ability to care for patients or to interact appropriately with other peers and caregivers.

Further, The Joint Commission requires that all people directly involved with patient care in a hospital must demonstrate **immunity** to certain communicable diseases, complete **TB screening**, and pass a **urine drug screen** and a **criminal background check**.

In order to get health clearance to go to the clinical units, students must complete all steps in the process specified by NCH unless an exemption applies due to previous verification during employment screening with written documentation provided by the employer.

You may have the requirements completed at NCH or by your own health care provider.

PHYSICAL EXAMINATION signed and dated by a qualified health care practitioner (PCP)

INSURANCE VERIFICATION: HEALTH

- All students must submit proof of health insurance coverage during their entire student tenure as part of their program requirements.
- Each student is responsible for obtaining medical care at his/her own expense or in keeping with existing insurance coverage for any illnesses or injuries sustained as a direct or indirect result of their affiliation with the program.

• Insurance verification: You may do this in one of the following ways:

- Go to your insurance company's website and print page with your name on it verifying coverage; **OR**
- Obtain letter on employer letterhead and signed by the Chief/EMS CEO verifying coverage; **OR**
- Obtain letter on insurance company letterhead verifying your coverage; **OR**
- Purchase student insurance – information available in Harper HS.

Note: insurance cards alone are not accepted as proof of insurance. Insurance documentation must have the name of your insurance company, your name as being covered, and a current date.

TB screen: The TB test result **must be dated no earlier April 1, 2018**. Acceptable forms of testing:

- **TB skin test** (may be one or two-step testing depending on your practitioner preference – program accepts either). Schedule this carefully. These tests must be read 48 to 72 hours after placement and cannot be self-read. **OR**
- **Interferon Gamma Release Assay (IGRA)** (blood test)
 - QuantiFERON®-TB Gold In-Tube test (QFT-GIT) or
 - T-SPOT®.TB test (T-Spot)

DOT 5 Panel Urine Drug Screen: It is the policy of NCH including all of its subsidiaries and entities to require drug testing of all students doing clinical time in any hospital facility and EMS agency in an effort to

ensure a work place and workforce free of substance abuse. We will not retain a student who uses illegal drugs and/or abuses legal substances. Confirmation of student status is contingent on passing the drug screen test and criminal background check. The DOT 5 Panel drug screen **MUST** be completed at NCH Occupational Health. The screener must be licensed to perform this drug screen.

- There are fees for these services. You will need 2 forms of ID when submitting to these tests.
- All negative urine drug screen forms done by NCH will be presented to the student and must be given to Christopher Dunn for the student file.

Test results and information completed by NCH shall be maintained in secure files within NCH. Access is limited to the applicant, MRO, and select NCH staff.

- Applicants who refuse to be tested will no longer be considered a student with NCH and need to withdraw from EMS 110.
- If evidence of sample tampering is present, NCH may require the applicant to provide an additional sample. Applicants who fail to comply with re-testing requirements will no longer be considered a student with NCH

A positive drug screen may be grounds for dismissal from the program.

- Positive drug screen results are reviewed by the MRO: Larry Wellendorf, MD, C-MRO, NRCME Medical Director Immediate Care | Occupational & Employee Health | Health Promotion & Wellness for NCH
- The student will be given the opportunity to discuss with the MRO any prescription medications or other extenuating circumstances which may have prompted a non-negative result.
- The MRO may further investigate the student's claim by accessing the prescription database or asking to see the original prescription packaging, date of issue and dosing instructions.
- If the MRO finds the claim to be valid, the non-negative result will be changed to negative.
- The MRO makes the final determination to re-test the applicant. He will communicate results to the DER (C. Mattera) who will discuss with the program Medical Director whether to retain or rescind the student's status.
- If a student exhibits **impaired behavior** in class or while engaged in program-related functions/duties, the program will send them for an immediate screen for cause. This screen may request the student to submit to a blood, hair, or urine test or to undergo a fitness evaluation to determine his or her ability to safely remain a student.
- If the applicant initiates a legal proceeding involving drug screen records, they may be disclosed to the extent permitted by law and the hospital's Release of Patient Information Policy.

- **Get blood drawn for Hepatitis B Surface Antibody titer and IgG titers drawn for Mumps, Rubella, Rubeola, and Varicella.** Titers are considered current if drawn up to one year before the start of class.

You may make an appointment with your PCP or **NCH Occupational Health** to have these titers drawn. You will need to obtain a copy of the lab results and submit to Christopher Dunn to verify immunity.

Have your immunization record and lab results reviewed by the Course Coordinator.

- **If blood titers show that you do not have sufficient immunity: Vaccination series are required prior to any hospital clinical rotation.**
 - **If needed, begin vaccine series**, either at your PCP's office or NCH Occupational Health department. **Some of these take time to receive the entire series. Start EARLY!**
 - If you need both MMR and Varicella vaccines, they **must** be given at the same time.
 - Hepatitis B immunization requires three doses of the vaccine. You will be advised by the PCP regarding the timing of each dose. A blood titer to determine immunity to Hepatitis B is **required** following completion of the immunization series.
 - Tetanus vaccine is recommended

FLU VACCINE MANDATORY:

NCH is committed to ensuring the health, wellness, and safety of its employees, physicians, patients, and visitors. Seasonal vaccination is the best way to prevent influenza infection and its complications. Therefore, all students are required, as a condition of working in a clinical unit, to show proof of annual vaccination against seasonal influenza.

Provide proof of flu vaccination to Christopher Dunn as part of the clinical health prerequisites.

Illinois State Police Criminal BACKGROUND CHECK:

Students must comply with a criminal background check.

Primary search - \$59.00

- Social security trace
- County criminal felony and misdemeanor (All Lived plus Cook County past 7 years)
- Multi-jurisdictional national search: National sex offender & global watch list
- Verification of highest degree earned
- Employment verification - one employer

The program will submit your name and e-mail address to NCH Human Resources who will send you the background check to be completed via email through Aurico. Turnaround is 3-4 days.

FELONY CONVICTION POLICY

Accepting individuals convicted of certain felony crimes into the EMT program or allowing them to continue in the program once a conviction has taken place or becomes known presents a unreasonable risk to public health and safety if such person has not offered proof of sufficient rehabilitation to warrant public trust.

IDPH will suspend, revoke, or refuse to issue or renew the license of any licensee after an opportunity for an impartial hearing before a neutral administrative law judge appointed by the Director, where the preponderance of the evidence shows that the licensee has been convicted (or entered a plea of guilty or nolo-contendere) by a court of competent jurisdiction of a **Class X, Class 1, or Class 2 felony offense** in this State or an out-of-state equivalent (HB5183 Enrolled LRB096 16642 KTG 31923 b) Public Act 096-1469.

Applications are not accepted from students who meet the above criteria. Continued enrollment of those who meet the above criteria during class will be terminated following a hearing in compliance with Illinois law.

Discretionary denial: Applications for enrollment and/or licensure by individuals convicted of other crimes including, but not limited to, DUI may be denied after consideration of the following:

- The seriousness of the crime and time elapsed since the crime was committed.
- Whether the crime relates directly to the scope of EMS service and the delivery of patient care.
- If the crime involved violence to, or abuse of, another person.
- Whether the crime involved a minor or a person of diminished capacity.
- Whether the applicant's actions and conduct since the crime occurred are consistent with the holding of a position of public trust.

If an exemption applies for urine drug screening and/or the background check, submit written verification on agency letterhead, signed by the Chief, indicating that the requirement has been previously met.

Health screening, physical exam; urine drug test, immunizations (flu – must be acquired when vaccine is available), & background check results:

DUE DATE: March 4, 2019

Hospital clinical rotations cannot begin until all health screening, immunization verifications, drug screen, and criminal background check are completed. Failure to comply with the clinical health requirements on time may constitute grounds for dismissal from the program.

Psychiatric or Substance Abuse Care/Treatment

A student who has received a decree by a Circuit Court/

or an examination by a qualified physician establishing that they are in need of psychiatric or substance abuse care/treatment shall be suspended from class. That person may be reinstated upon findings by the Circuit Court or a qualified physician that they are being successfully treated for the mental illness/substance abuse and have been approved to return by the EMS MD.

STUDENTS with a COMMUNICABLE DISEASE

A student with an infectious or communicable disease or is a carrier of a communicable disease may attend class and participate in activities whenever, through reasonable accommodation, there is no significant risk of transmission of the disease to others and it would not place the health of the student at risk. The potential risk shall be evaluated on a case by case basis in accordance with NCH policy and in concert with the EMS MD.

Such a student may be denied admission to, or may be dismissed from, the EMT course whenever the disease renders the student unable to attend class for more than three full calendar days, disqualifies him or her from clinical duty, or makes it impossible for them to perform the essential functions of an EMT.

SCHEDULE (Course calendar):

The schedule contains class dates, times, and assignments and may be subject to change.

Clinical Shifts – 2 - 8 Hour Shifts

- Open shifts per unit depend on hospital availability. Students will select their shifts on days or times when EMS 110 is not in session. When selecting clinical shifts, students may not do more than 1-- 8 hour shift without at least 8 hours between shifts. NO EXCEPTIONS.
- Students must be willing to complete clinical shifts at all System hospitals as needed for scheduling.
- Failure to complete the shifts for any reason including failure to complete all aspects of the health verification process, or failure to obtain an AHA BLS CPR certification are grounds for failure of EMS 110.

***Timing of shifts:** Research shows that having sufficient time between shifts helps healthcare workers recover from work. Shift work can increase the risk of many diseases, e.g. cardiovascular.

The increased risk is partially caused by insufficient recovery from work which interferes with the normal function of the autonomic nervous system regulating heart function and BP.

Schedule changes: Once approved and confirmed with the host hospitals, the Clinical Coordinator **will not change more than one clinical shift per student except for ISOLATED cases of severe illness and/or extreme family emergency.**

Absences/late arrivals: If you experience an unforeseen personal emergency or acute illness and will miss or be late to an assigned clinical rotation, you must notify the following in advance of the missed rotation:

1. **Clinical unit nurse in charge.** Phone numbers for each unit are in the clinical instruction plans.
2. **Course Coordinator.** Call 847/ 618-4492 and send an e-mail to cdunn@nch.org by 6:30 am for a 7:00 am shift and by 2:30 pm for a 3:00 pm shift. If there is no answer, leave a message on voice mail. Provide the name and title of the person on the clinical unit to whom the absence/tardiness was reported.

Determination that a lateness or absence is excused is at the sole discretion of the Class Coord, Program Director and/or EMS MD.

Failure to report on time or at all to a clinical unit as scheduled without cause and advance notice (no call, no show) constitutes irresponsible behavior resulting in an **unexcused absence** pending an investigation.

If tardy and allowed to stay, the student must complete the full shift time. A missed shift must be made up at the convenience of the host hospital.

After one unexcused absence, the student will be placed on academic probation. **Two late arrivals and/or unexcused absences** will require a meeting with the Class Coordinator, notification of the EMS MD, and may result in disciplinary action. **Proof of illness may be required to affirm an excused absence.**

A student who goes to the wrong clinical unit, or to the assigned unit on the wrong day or time, will be sent home and must be rescheduled. This will constitute an unexcused absence. The student is responsible for notifying the Clinical Coord of their error immediately.

Leaving early: Students may not leave a clinical unit before shift end unless approved **in advance** by the Class Coord. Leaving early without permission is considered unprofessional conduct.

Non-professional conduct: Confirmation that a student exceeded acceptable times in non-patient care activities, was not actively engaged in patient care activities, or violated the conduct specified in the affective objectives, will trigger the program's corrective coaching/disciplinary action policy.

EVALUATION FORMS Clinical Activity Performance Record for each clinical unit must be a complete reflection of the patient care contacts and skills performed by the

student, verified and signed by the preceptor who observed the student's performance (may need more than one signature); and submitted to the Clinical Coordinator within one week of the rotation.

EMT Ambulance Observation

Goal: Students observe theoretical concepts into practice under the direct supervision of an approved preceptor in the field environment. They are expected to develop contextual, integrative, and adaptive competencies using higher order critical thinking skills.

During the field internship, EMT students will

1. effectively observe prehospital patient care under the direct supervision of approved ambulance personnel.
2. gain an understanding of the role of a prehospital EMT by observation of EMT's on actual EMS calls

COURSE EVALUATIONS

Students are evaluated on their achievement of cognitive (knowledge), psychomotor (skills) and affective (professional attributes) objectives in each component of the course. Performance is evaluated during class, labs, hospital clinical rotations, the field internship, and during the final exams. Employers do not have access to actual grades unless the student signs a release of academic information form, but will be informed if the student has met or not met program objectives.

Students evaluate the Course Coordinator and the course.

Program evaluation is a continuing and systematic process with internal and external curriculum validation in consultation with employers, faculty, preceptors, students and graduates.

Outcomes assessments include but are not limited to: exit point completion, graduate satisfaction, employer satisfaction, licensing examination results and national registration.

MEASUREMENTS OF OBJECTIVE ACHIEVEMENT

Cognitive objectives are measured by quizzes, and written exams. Psychomotor and affective objectives are measured by simulations, scenarios, practical examinations, and direct observation.

- **24 Quizzes:** 20 multiple choice questions each. Quizzes cover the content from the previous lecture and assigned reading. All answers are cited to a page or range of pages in the textbook.
- **4 Modular Exams** multiple choice and occurring at the end of each Module (1-4 – see the course schedule for dates).

Each exam is 150 questions taken from the content of the entire module. All answers are cited to a page or range of pages in the textbook.

- **Final written exam:** Consists of 150 multiple-choice questions that are a summative assessment of cognitive objectives across the whole course.
- **Final practical exam** Assessing the students ability to correctly sequence a BLS medical and trauma assessment.

Academic Honor Code: Students are held to a strict code of academic honesty. Personal items, such as purses, backpacks, briefcases, books, notes, cell phones and electronic devices (turned off) must be put away during testing.

The instructor reserves the right to ask students to remove jackets or articles of clothing that are bulky and could be suspicious of containing or covering prohibited devices/materials during the exam.

Students are expected to take quizzes and exams on the dates and times assigned. A seating chart may be devised at the discretion of the faculty. No tardiness or absence will be excused for a modular or final exam unless a compelling cause of the most emergent personal nature has occurred.

If a student is late to a quiz or exam, they may not be permitted entry after the exam booklets have been distributed and a zero may be given (at the discretion of the faculty). If the student is permitted entry and is able to take the exam, they will only have the remaining exam time to complete all questions.

Quizzes and written exams allow approximately one minute per question. Students must demonstrate good time management skills and complete all questions within the allotted time.

If refused admittance to the exam due to tardiness, the student must take the exam on the original day of testing at the convenience of the Course Coordinator. No make-up quizzes shall be given during class time.

Make-up exams on an alternate date will only be given for extreme extenuating circumstances. The student may be required to provide evidence to verify illness or to prove the validity of the emergency.

A second lateness or absence for a quiz/exam will result in a meeting with the EMS Administrative Director and EMS MD and may result in dismissal from the program.

GRADING and RETEST policies

The cumulative quiz average during each module must be 80% or a mandatory guided study assignment will be assigned.

This assignment is not punitive in nature, but rather is designed to assist the student in study so they may pass the modular exam in a fashion that will not cause

mandatory withdrawal from EMS 110 due to failure to master the content of the module.

Each modular written exam and the final written exam must be completed with a minimum score of 80% or above to pass.

Students who score between 75%-80% on the first attempt will have one opportunity to retake the failed written exam. The highest score awarded for a retest is 80%.

There is no retake for the final exam. Students who score a 74% or less will have failed the exam and will not be eligible to challenge the NREMT or IDPH credentialing exam. All scores of 75% or greater will be factored into the students current score with the understanding that only final weighted scores of 80% or above will enable the student to challenge the NREMT or IDPH credentialing exam.

Students who score below 75% on the first attempt or below 80% on the retest will receive an F for that exam and will be dismissed from the program with an option to re-enroll the following year.

Exit interviews will be conducted with the student and Course Coordinator. A representative of the employing EMS agency and the EMS MD or his designee may be invited to attend the exit interview by either party.

Grade point averages:

	<u>% of GPA</u>
Quiz average	20%
Modular exams	60%
15% each for module exams 1-4	
Final Written exam	<u>20%</u>
	100%
ED Clinical shifts	Pass/fail
Ambulance Observation	Pass/fail
Practical Exams	Pass/fail

Grading Scale

	94-100	A
	87-93	B
Passing score	80-86	C
No credit awarded	75-79	D
	< 75	F

GUIDED STUDY

Students having difficulty mastering course objectives at any time as evidenced by poor quiz scores will be placed on Guided Study. Their Provider Agency will be notified of the Guided Study requirements.

Students on Guided Study are required to complete remediation designed to improve their performance. Students may at any time request assistance from the Course Coordinator.

Guided Study is meant to help a student master the objectives to ensure that they will be successful in completing the current module exam and ultimately EMS 110.

If a student fails to satisfactorily complete a guided study plan, they will be dismissed from the course and given a failing grade for that module.

EMT LICENSURE EXAMS

Program evaluation should utilize certification examinations developed by an independent national organization that employ cut scores based upon a valid psychometric formula which judges entry level competence and uses practice analysis consistent with the description of the profession. Examinations should be national in scope with uniform passing standards and statistical reports. Cognitive instruments should reflect the Standards for Educational and Psychological Testing of the American Psychological Association (CoA).

The EMS MD, Agency and NWC EMSS agency Chiefs/administrators, have strongly recommended that all graduates of the NCH EMT Program take the National Registry exam (NREMT) as a means to achieving Illinois licensure. However, by Illinois law, graduates have the choice of taking the State of Illinois EMT exam administered by Continental Testing Services (CTS) or the NREMT written exam for EMT's.

Both written exams are conducted at computer testing centers. For specific NREMT testing policies see: www.nremt.org

Note: Most states require the NREMT exam and/or continued national registration as a requirement of EMS licensure/certification. They may require an individual to become nationally registered before authorizing reciprocity to their state.

Passing the National Registry or state exams does not automatically confer licensure in Illinois. EMS Systems must recommend licensure, the individual must pay a license fee and then IDPH will award an EMT license.

Students will declare their selected exam choice at the end of class. They will be given instructions on how to apply for the test of their choice and then to submit for State licensure when they have successfully completed all course requirements.

GENERAL COURSE POLICIES

ATTENDANCE

Students are expected to attend every class, lab, quiz, exam, clinical rotation, and ambulance observation shift and be on time and duty ready unless they have made

appropriate prior notice and have received an excused absence.

Classroom absences make it difficult for the student to adequately learn essential didactic concepts. The equivalent of **three or more class absences (excused or not) may result in dismissal from the program.**

Late arrival/tardiness: Highly unusual or extenuating circumstances occasionally occur causing a student to be late without appropriate notice or justification. A trend of arriving after the posted start times without reasonable justification, is considered unprofessional conduct and the student will be recorded as tardy. See below for consequences of late arrivals.

Providing notice: Inform the course coordinator in advance regarding the nature of your emergency if you are going to be late or absent from a class.

The course coordinator will determine if a tardy arrival or absence is excused. Traffic congestion, etc. will not be considered excused unless grossly extenuating circumstances apply.

Unexcused lateness/absences: Any late arrival/absence without prior notice and/or reasonable justification shall be considered unexcused and shall be noted in the student record.

Two unexcused late arrivals to class or clinical rotation is considered unprofessional behavior, a violation of affective objectives, and places the student's continued enrollment in class in jeopardy. This conduct shall be reported to the employer/sponsor and the Program Director for a determination of disciplinary action.

Missed material or clinical shifts shall be made up at the discretion of the or Course Coordinator.

BEHAVIOR and LANGUAGE: Students are expected to behave in a professional manner and refrain from using profane or defamatory speech at all times during any program function, class or clinical assignment. Guests, faculty and peers are to be treated with civility and respect. Incivility is especially disturbing because these same students will go on to care for "vulnerable" patients. Inappropriate speech will require an immediate public apology and will trigger disciplinary action that may include dismissal from the program.

CAFETERIA: The cafeteria is located on the first floor of the main hospital building.

DRESS CODE

Students are expected to project a professional appearance and demeanor at all times. It is important that they dress in a professional, tasteful, and discrete manner consistent with the expectations of the hospital. Therefore, students are expected to arrive for all lectures in business casual attire. Please see HR 301 concerning attire.

Based on a decision by System Providers, all students must attend clinical rotations, and ambulance

observation days **in the program-designated uniform** (a required mode of dress where the color, style, and vendor are stipulated). This is the grey polo shirt from Lands End with the system logo on the garment.

Absolutely no jeans are allowed. Any deviation from the dress code may result in the agency, or ED charge nurse sending the student home. The student will then need to reschedule the missed shift.

Appropriate undergarments shall be worn at all times. If, in the opinion of the instructor, the standards for dress code and personal appearance have not been met, a student may be denied entry to class and be given 15 minutes to correct the situation. If they are unable to return in compliance with program policy within 15 minutes, they will receive an unexcused absence. Two or more violations of the appearance policy is considered noncompliance with affective objectives and will be grounds for corrective action.

Specific Dress Guidelines

EMS agency employees: Duty uniform with agency logo prominently displayed.

Unaffiliated students: Land's End grey shirt with System Logo. Shirts worn unbuttoned, with the shirttail out or with logos other than the EMS System/Agency are not acceptable.

- **Pants:** Navy blue or black dress or uniform pant. Must be the appropriate length and size with finished hems that do not drag on the floor or ride down the hips/buttocks. This excludes department approved shorts while in the classroom or hospital clinical units.
- **Shoes/boots:** Should be clean with laces tied; safe for the work environment.
- **ID BADGES:** NCH EMT Student ID badges will be handed out after the first module exam. They must be worn in a visible location on the upper torso at all times within NCH and all clinical units (hospital and field).
- **Jewelry:** A watch with a second hand or second counter must be worn to every class with a lab and each clinical shift. No more than three earrings per ear. Ear rings worn in the clinical units shall be small and non-dangling. Ear gauges shall be no larger than 10 mm. No visible body piercing jewelry beside the ears is acceptable.
- **Body art/tattoos:** Tats are considered the same as speech. Tattoos may be visible if the images or words do not convey violence, discrimination, profanity or sexually explicit content. Prohibited ink must be covered with bandages, clothing, or cosmetics such as Dermablend® while engaged in student activities (hospital/field). NCH reserves the right to judge the appearance of visible tattoos. None may be visible on the face.
- **Hats:** No hats may be worn in class or hospital

clinical units. Religious head coverings may be acceptable per prior agreement with the Class Coordinator as long as they do not jeopardize student and/or patient safety and wellness.

- **HYGIENE:** Good hygiene is essential. Use of unscented personal hygiene products and makeup is acceptable. Due to respiratory sensitivities, allergies and asthma; any fragrance which produces a scent or odor strong enough to be perceived by others including; but not limited to colognes, perfumes, aftershave, and lotions are not to be worn to class or clinical units. Also unacceptable are odors from tobacco products; alcohol, body or mouth odor; excessive make-up; and chewing gum in the clinical units.
- **Hair:** Shall be clean and naturally styled with no bright or unnatural colors. Facial hair must be neatly groomed. Pull long hair back with clips, ties, braids, or bands while providing patient care. It must never fall forward on to a patient.
- **Fingernails** must be clean and trimmed not to exceed ½ inch from fingertips while in the clinical units. No artificial nails may be worn while in the clinical units or field experience.

EXPOSURE to body secretions:

If any student experiences a significant exposure event as defined in Policy I-2, they shall

1. immediately wash the area with soap and water or irrigate their eyes with water/saline.
2. Report the exposure to the Designated Infection Control Officer (DICO) of your EMS agency and the class Lead Instructor. Follow the DICO's instructions.

FOOD in classroom: Eating in the classroom is allowed if class surfaces remain clean and garbage is placed in proper receptacles. All food and beverage privileges will be revoked if classroom furnishings remain soiled or damaged due to food or beverages and/or educators must clean up after class.

HARASSMENT: Students have the right to be free from abuse or harassment at NCH. The program has a zero tolerance policy relative to harassment or bullying. **Harassment** is an unwelcome behavior that disturbs or irritates others and/o creates a hostile work environment.

Unwelcome sexual advances, requests for sexual favors or other verbal or physical conduct of a sexual nature constitute sexual harassment.

Discrimination: Unfair treatment of a person or group of people as a result of prejudice. Discrimination is a violation of the inherent dignity of a person.

We encourage any student who feels that they have been harassed or discriminated against due to a protected status to meet with us and report their concerns. It is our policy to

- Promptly investigate any allegations of abuse;
- Take steps to protect the safety of the person during the investigation;
- Protect the reporter from any retaliation; and
- Train all staff in the detection and reporting of such suspected abuse;

For full definition and information on reporting alleged harassment, see Harper Catalog/Student Handbook.

Cultural awareness: ability to understand, communicate with, and effectively interact with people across cultures. This involved understanding and respecting each person's unique needs, culture, values and preferences. Students are expected to be culturally competent, avoiding barriers to strong cross-cultural relationships:

Prohibited behaviors:

Stereotyping: Generalizations that involve an oversimplified concept or belief about a group of individuals. It does not take into account present-day realities.

Prejudice: Attitudes and behaviors that may be largely unconscious. Refers to a preconceived judgment or opinion. Often takes the form of ethnocentrism (the belief that one's group is superior to all others. May involve tendency to see differences as weakness.

Intimidation; Occurs when a person belittles, frightens, discourages or inhibits other people, especially those perceived as weaker.

Collusion: Form of exclusion. Involves cooperation with others, through which stereotypical attitudes, prevailing behaviors and/or norms are knowingly or unknowingly reinforced. Silence is the most common form of collusion.

INCLEMENT WEATHER

There may be times when class schedules will need to be altered based on inclement weather.

The Course Program Director will make the decision to cancel class or resume normal class schedules.

Decisions to change normal operations must be made at least two hours before class start times.

Announcements about schedule changes will be communicated by e-mail.

INSURANCE COVERAGE: LIABILITY

Each student is provided professional liability coverage under the umbrella of NCH as long as they are acting in good faith as agents of the program under the direct supervision of an approved preceptor and within their allowable scope of practice.

PARKING:

Students may park in the visitor parking garage on the east side of the hospital and enter at the main entrance. During skills labs in the Learning Center, students may park in the Busse Center for Specialty Medicine parking garage or immediately across the street from the parking garage.

SMOKING AND TOBACCO USE: NCH recognizes the effects and costs of tobacco and nicotine use on our society and is committed to providing a healthy environment for our patients, employees, physicians, students, visitors and volunteers without the hazards of these products. **NCH is a tobacco-free campus.** Use of all tobacco products is prohibited on the NCH campus including the hospital, adjacent hospital grounds, parking lots, and Wellness Center. Students may only smoke or use tobacco products in their own vehicles. Tobacco products include cigarettes, e-cigarettes, pipes, vaporizers, cigars, hookahs, or tobacco in any other form including smokeless tobacco which is any loose, cut, shredded, ground, powdered, compressed or leaf tobacco that is intended to be placed in the mouth without being smoked. The Harper College Health and Psychological Services department and NCH both offer assistance to students who desire to quit smoking through cessation workshops and other support. Violation of this policy will constitute grounds for dismissal from the program.

Selected resources:

FDA 101: Smoking Cessation Products

Tobacco Use – Extinguishing the Epidemic

www.Smokefree.gov

IL Quitline = 866=QUIT-YES

SOCIAL MEDIA

We understand that social media can be a fun and rewarding way to share your life and opinions with family, friends and co-workers around the world. However, use of social media also presents certain risks and carries with it certain responsibilities. To assist you in making responsible decisions about your use of social media while a student in the NCH program, we have established these guidelines for its appropriate use.

Social media includes all means of communicating or posting information or content of any sort on the Internet, including to your own or someone else's web log or blog,

journal or diary, personal web site, social networking or affinity web site, web bulletin board or a chat room, whether or not associated or affiliated with NCH, as well as any other form of electronic communication.

Before creating online content, consider the risks and rewards that are involved.

Keep in mind that any of your content that adversely affects you, fellow students, instructors, or otherwise adversely affects employees, patients or their families, people who work on behalf of NCH or NCH's legitimate business interests may result in disciplinary action up to and including termination from the program.

Students are not allowed to use any personal electronic devices while class is in session unless specifically authorized by the instructor. Cell phones, pagers or other electronic devices used for messaging must be silenced and all electronic access and/or communication deferred until breaks unless an emergency exists. If, on rare occasions an emergency requires an immediate response, the student shall exit the classroom to use the device.

Even if your social media activities take place completely outside of class, as your personal activities should, what you post can reflect on your professionalism and the program. Thus NCH reserves the right to monitor postings by students.

Be respectful

Always be fair and courteous to fellow students, instructors, patients and their family members, or people who work on behalf of NCH and Harper College in your postings or content. Keep in mind that you are more likely to resolve program-related complaints by speaking directly with the Program Director, instructors, or your fellow students than by posting complaints to a social media outlet. Nevertheless, if you decide to post complaints or criticism, avoid using statements, photographs, video or audio that reasonably could be viewed as malicious, obscene, threatening or intimidating, and/or that disparage patients, classmates, instructors, Program personnel at NCH or Harper College or that might constitute harassment or bullying.

Prohibited, Objectionable or Inflammatory Posts

Inappropriate postings include, but are not limited to, discriminatory remarks, harassment, and threats of violence or similar inappropriate or unlawful conduct. *Students shall not post anything that is false, misleading, profane, discriminatory, libelous, vulgar, racially, sexually, or ethnically objectionable, unlawful or contains other inappropriate content, or is hateful to another person or entity or content that violates Federal Health Insurance Portability and Accountability Act (HIPAA) patient confidentiality provisions.*

False or defamatory statements or the publication of an individual's private health information (PHI) could result in legal liability for you and the EMS program will subject you to disciplinary action up to and including termination from the program.

TUITION AND FEES

Students must pay current Harper College tuition and fees within due dates set by the College. Tuition does not cover the cost of the licensure exams nor the initial State EMT licensure fee.

Students whose tuition is being paid by their employer must provide 3rd party authorization forms to Harper College by deadlines set by the College or they will be held personally accountable for tuition fees.

Students who have not paid tuition or fees on time and have not made alternative arrangements shall be dropped by Harper College from the class.

REFUND POLICY: See Harper College student handbook for refund policy.

Retake fees: Students retaking the course or a portion of the course will be charged current tuition and fees unless compelling circumstances exist and alternate arrangements are made by the Program Director.

VETERAN'S BENEFITS

The EMT program is approved by the Department of Veteran's Affairs for educational and training benefits via Harper College. Eligible veterans, dependents, reservists, and service members may be able to seek tuition reimbursement while they are in good standing in the program. If you think you may be eligible and would like to pursue these benefits, please contact Harper College.

WITHDRAWALS

Students may petition for withdrawal from the program based on the need for extended leave or extenuating circumstances. They will be considered for readmittance on a case-by-case basis. Placement in the next class will depend on the student's previous performance as well as the point in the course at which they withdrew.

Students who withdraw after the regular registration period must do so officially at Harper College by the appropriate deadline date. A student who does not withdraw officially prior to the last date for withdrawals is subject to an F grade and full tuition payment for that class. See the Harper College catalog for specific details.

RESOURCES FOR STUDENTS

Harper College makes a wide variety of resources available to all EMT students attending class at NCH.

See the Harper College Catalog/Student Handbook for details relative to Student Development, Access and Disability Services (ADS), Health and Psychological

Services and Wellness Programs; Student Activities, Fitness Center, Academic Support Services such as the Writing Center, and Resources for Learning Division; Library Services; and the computer lab.

Academic Support Centers

Success Services for Students is part of the Resources for Learning Division of Harper College. Appointments may be scheduled by going directly to that office or by calling 847.925.6715.

Success Services for Students provides individual instruction for students who would like to improve their learning skills. One-hour sessions include *Study Skills, Test Taking Tips, Time Management, Reading Strategies, Test Anxiety, Memory, Concentration, Motivation, Note-taking Skills, Math Strategies, Accounting Tips, Economics Tips, Preparing for Finals, and Online Study Tips.*

Students can also schedule a **Test Performance Analysis** in any content area. They will be given a complete breakdown on types of errors being made as well as given specific strategies to use on subsequent tests.

In the **Learning Styles Inventory** session, the student's personal learning style is determined and specific strategies are recommended to complement that style. Students can take the *Study Behavior Inventory*, which identifies strengths and weaknesses in specific academic activities and attitudes.

Supplemental Instruction (SI) provides regularly-scheduled, informal review sessions. Students compare notes, discuss readings and develop organizational tools. Students learn how to integrate course content and study skills while working together.

Tutoring: Individualized mentoring is available to students from program faculty at the mutual convenience of the student and learning coach.

Writing Center

The Writing Center provides several free services that are available to help students succeed. They can work in the open computer lab, consult with tutors on a walk-in basis about their papers in all academic areas, and make appointments with English tutors to discuss specific assignments and develop skills in writing, literacy, and critical thinking.

Tutors can:

- Clarify assignment requirements
- Guide you through steps of writing process
- Suggest strategies for revision
- Respond to drafts
- Answer specific questions on structure, grammar, and content

- Reinforce skills in building vocabulary, writing sentences, developing paragraphs, and proofreading
- Assist with documentation
- Offer strategies for interpreting, analyzing, and evaluating a text
- Develop a plan for building on strengths and improving writing and reading skills

Call 847.925.6796 to make an appointment.

STUDENTS with DISABILITIES and Academic Accommodations

Students are expected to demonstrate the physical, mental and emotional capacity to perform all the essential functions of the EMT profession during the course with or without reasonable accommodation.

Reasonable accommodation is any modification or adjustment to a job or the work environment that will enable a qualified applicant or employee with a disability to participate in the application process or to perform essential job functions. Reasonable accommodation also includes adjustments to assure that a qualified individual with a disability has rights and privileges as required by the Americans with Disabilities Act (ADA).

If you have a disability (learning, ADHD, physical, psychological or other) and **are requesting any accommodation** during the program, you must **contact the Program Director at the beginning of the course**. No grades will be adjusted retroactively after the need for accommodation is revealed.

Students must also **contact Access and Disability Services (ADS) at Harper College** to discuss eligibility for reasonable accommodations. Any student already connected with ADS shall provide the NCH Course Coordinator with a copy of your approved Accommodation Plan to determine if it is applicable to, and reasonable to honor, during the EMT Program.

Access and Disability Services is located in Building D, room D119; on the Harper College campus; 847.925.6266 (voice) or 224.836.5048 (videophone for deaf and hard of hearing callers only).

The Program will review each request on an individual basis and make decisions based on the following:

- To be considered for an accommodation under the ADA, an individual must present adequate documentation demonstrating that his/her condition substantially limits one or more major life activities.
- Only individuals with disabilities who, with or without reasonable accommodations, meet the eligibility requirements for EMT licensure are eligible for accommodations.

- Requested accommodations must be reasonable and appropriate for the documented disability and must **not** fundamentally alter the program's course of instruction or ability to assess the student's ability to perform the essential job functions of an EMT.
- Professionals conducting assessments, rendering diagnoses of specific disabilities and/or making recommendations for appropriate accommodations must be qualified to do so.
- Documentation must include a comprehensive evaluation with objective evidence demonstrating the existence of a disability.
- The name, title and professional credentials of the qualified professional must be clearly stated in the documentation. Documentation must be submitted on official letterhead, typed, dated, and signed. The professional diagnosis must include:
 - A valid, professionally recognized diagnosis of the candidate's disability (e.g. pursuant to the Diagnostic and Statistical Manual of Mental Disorders (DSM V: revised)) by an appropriately qualified expert with copies of and reported scores from professionally recognized diagnostic tests, where applicable.
 - Documentation that clearly identifies the nature and extent of the functional limitations that exist as a result of the diagnosed disability.
 - Sufficient evidence to demonstrate that the functional limitation substantially limits the individual in performing one or more major life activity.
 - Specific information about the significance of the impact the disability has on the candidate in the learning and measurement environments.
 - Specific recommendations for accommodations.
 - An explanation of why each accommodation is recommended and why it is necessary to alleviate the impact of the disability in taking the learning and measurement environments.
- All documentation submitted in support of a requested accommodation will be kept in confidence and will be disclosed to NCH staff and consultants only to the extent necessary to evaluate the accommodation. No information concerning an accommodation request will be released to third parties without written permission from the student.

Each student's circumstances are unique and a case by case approach is required. NCH reserves the right to request additional information at any time from the student requesting accommodations.

Because the NREMT credentialing exam allows only additional time as an accommodation for the credentialing examination; it is the policy of the EMT program to allow only additional time.

Therefore examination accommodation shall not include text to speech software or readers. Additional time shall be the only accommodation offered or accepted.

If you believe that you have been unfairly or improperly treated due to a disability, you may contact the Harper College Campus Section 504/ADA Compliance Officer. The process, steps, and timelines to follow for filing a grievance are set forth in the Harper College Grievance Policies available on line:

. <http://goforward.harpercollege.edu/services/ads/policies.php>

Essential job functions for a PM generally require:

Language:

- Ability to read, analyze, and interpret policies, procedures, professional publications and governmental regulations
- Ability to write reports and business correspondence
- Ability to make presentations and communicate effectively with patients, peers, preceptors, supervisors, and on-line medical control
- Possess strong listening skills
- Strong emotional and social intelligence with the ability to handle sensitive situations and confidential information

Mathematical functions: Ability to add, subtract, multiply, and divide in all units of measure using whole numbers, common fractions and decimals

Reasoning ability

- Ability to solve practical problems while dealing with several abstract and concrete variables
- Understand and able to appropriately apply an extensive variety of complex technical and instructional material
- Make accurate assumptions and determine a plan of care within limits set for time-sensitive patients
- Make reasonable and logical conclusions from information which may be conflicting or disjointed

Possess the necessary knowledge, skills, and abilities to:

- operate basic life support equipment with safety and precision
- operate complex communications equipment; and
- enter data into and retrieve data from a computer using System-approved software and meeting System standards of competency.

Physical demands

- Sit, stand, walk, run, crawl, squat, bend, kneel, climb stairs and into and out of EMS vehicles, lift moderate to heavy objects, perform chest compressions.
- Frequent talking

- (Corrected) vision to 20/30 in at least one eye with color discrimination for at least red, amber, and green, and the ability to differentiate skin colors and the color of various body fluids.
- (Amplified) hearing adequate to hear conversational speech and accurately assess BPs, lung, bowel, and heart sounds
- Sufficient strength, endurance, conditioning and motor control to walk and carry patients/EMS gear over rugged, uneven terrain and up and down stairs; lift patients with one partner (up to 250 lbs.) safely onto a stretcher, move a patient on a stretcher up or down at least 2 flights of stairs; reach and pull in an ambulance; move them from the point of patient contact to the receiving location; and to perform at least two minutes of quality manual CPR with two minute breaks between compression sets for at least 30 minutes.

Work environment

Considerable health and physical strength is necessary to perform the duties of an EMT.

Though safety measures are implemented whenever possible and a culture of safety is embraced, there remain numerous unavoidable aspects of an EMT's job that may place the individual at risk of personal illness or injury. These include, but are not limited to:

- Driving an emergency vehicle using lights and sirens
- Exposure to hostile or combative patients and other individuals
- Response to violent crime scenes
- Response to incidents involving chemical, radiological, biologic, and explosive hazards
- Exposure to communicable diseases
- Danger from moving traffic at highway/roadway incidents
- Exposure to contaminated sharps and medical waste
- Performance of certain high-risk procedures in the delivery of patient care
- Noise level is moderate to high
- Temperature level will vary from extreme cold to extreme heat
- Moisture level will vary from extreme dry to rain, snow and ice, and may require immersion in water

If reasonable accommodation is to be exercised by a qualified individual with a disability using products, appliances, or personnel, it is the student's responsibility to acquire the resources for their personal use due to the cost of the accommodation needs.

DISCLAIMER

The NWC EMSS reserves the right to change requirements, curriculum, and class policies as the educational, legal, or healthcare environments change and as deemed necessary by the NWC EMS MD, and Federal and State rules and/or regulations.

The program operates under the authority of **Matthew T. Jordan**, M.D. FACEP, Medical Director of the program.

Contact information:

Connie J. Mattera, M.S., R.N., EMT-P

EMS Administrative Director
EMS System Coordinator
Phone: 847/ 618-4485 (work)
847/ 493-9974 (cell)
e-mail: cmattera@nch.org

Christopher Dunn, AAS, EMT-P

EMT Program Instructor
Phone: 847/ 618-4492
e-mail: cdunn@nch.org

Pamela Ross (secretary)

Phone: 847/ 618-4482
E-mail: pross@nch.org
Fax: 847/ 618-4489

For additional names and contact information for hospital EMSCs/educators, Provider Agencies and their EMSCs, see the **System Directory** posted on the NWC EMSS website under the About Us tab.

Northwest Community Hospital

EMS offices – Kirchoff Center
800 W. Central
Arlington Heights, Illinois 60005

Office hours: Monday through Friday
8:30 am – 5 pm

WEBSITE: www.nwcemss.org

The Family Educational Rights and Privacy Act (FERPA)

The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. § 1232g; 34 CFR Part 99) is a Federal law that protects the privacy of student education records. The law applies to all schools that receive funds under an applicable program of the U.S. Department of Education.

The Act establishes the rights of students to inspect and review their education record; provides that personally identifiable information will not, with certain exceptions, be disclosed without the student's permission; provides for guidelines for the correction of inaccurate or misleading data through informal or formal hearings; grants the right to file complaints with the Family Educational Rights and Privacy Act office concerning alleged failures by the institution to comply with the Act, and makes provision for notice to the students concerning their rights.

FERPA allows schools to disclose student records, without consent, to the following parties or under the following conditions (34 CFR § 99.31):

- School officials with legitimate educational interest (demonstrable need to know by any staff member in terms of his or her assigned duties);
- Other schools to which a student is transferring;
- Specified officials for audit or evaluation purposes;
- Appropriate parties in connection with financial aid to a student;
- Organizations conducting certain studies for or on behalf of the school;
- Accrediting organizations;
- To comply with a judicial order or lawfully issued subpoena;
- Appropriate officials in cases of health and safety emergencies; and
- State and local authorities, within a juvenile justice system, pursuant to specific State law.

Records kept by the NCH that are accessible to the student:

RECORDS ON FILE	PURPOSE OF RECORDS
Application	Placement
EMT Transcripts	Advisement
Admission test scores	Determine placement
Grades	Measurement of objective achievement
Correspondence	Anecdotal notes used to document performance and validate trends
Disclosure records	Record of disclosure of personally identifiable information; advisement
Fact sheet	Demographic information for records
Scores: written & practical	Measuring performance and identifying future learning needs
Immunization records	Health counseling; risk assessment
Physical examination	Fitness for duty on clinical and field units
Student grievance	Official record
Disciplinary record	Official record
Evaluations	Counseling and evaluation
Financial data	Billing and collection
Records, exclusive of Federal and State Codes listed below**	Safety and security of students

* Students who wish to determine the general content of their record may make an appointment with the Course Coordinator to secure this information.

** The basis for this policy is the Ill Rev Statute, Ill Juvenile Court Act - Chapter 37, Article 2, Section 702-8(3). Ill Rev Statute, Ill Criminal Code - Chapter 38, Sections 206-3 and 206-7. Title 42, U.S.C., 371b.

Educational records which are not governed by the Act and which are not accessible to students

1. Records kept by NCH personnel which are used only by the maker or his or her substitute and are not available to any other person.
2. Law enforcement records that are kept apart from the student's other educational records and are maintained solely for law enforcement purposes, and are made available for inspection by Public Safety personnel only when acting in the line of duty. Such records are not made available to persons other than law enforcement officials of the same jurisdiction so long as educational records maintained by the institution are not disclosed to the personnel of the law enforcement unit.
3. Student records made or maintained by a physician, psychiatrist, psychologist, or other recognized professional or para-professional acting

in his or her professional capacity or assisting in that capacity, and which are made, maintained, or used only in connection with the provision of treatment to the student and are not available to anyone other than persons providing such treatment, except that such records can be personally reviewed by a physician or other appropriate professional of the student's choice.

Directory information. The following items are designated as "Directory Information", and may be disclosed or released by the hospital for any purpose, at its discretion: the student's name, address, program of study, participation in officially recognized activities and dates of attendance, diplomas and awards received, and the most recent previous educational institution attended.

Currently enrolled students have the right to withhold the release and disclosure of any or all of these items by giving written notice to the Course Coordinator. Request for non-disclosure will be effective for one academic year.

Procedure to inspect and review records

The law provides students with the right to inspect and review information contained in their education record; to a response to reasonable requests for explanations and interpretations of the records; to challenge the contents of their education record; to have a hearing if the outcome of the challenge is unsatisfactory; and to submit explanatory statements for inclusion in their files if they feel the decision of the hearing officer is unacceptable.

The Course Coordinator will coordinate the inspection and review procedures for student education records, which include admission, personal, academic, and financial files, and academic, disclosure and placement records. Students wishing to review their records must make written request to the Course Coordinator listing the item or items of interest.

Records covered by the Act will be made available within 10 working days of the request. Students may have copies made of their records with certain exceptions, (e.g., a copy of the academic record for which a financial "hold" exists, or a transcript of an original or source document which exists elsewhere.) There may be a cost for the photocopies. Education records do not include records of instructional, administrative, and educational personnel which are the sole possession of the maker and are not accessible or revealed to any individual except a temporary substitute, records of a law enforcement unit, student health records, or employment records. Physicians of the students' choosing may review health records.

Students MAY NOT inspect and review the following: Financial information submitted by their employers; confidential letters and recommendations associated with admissions, educational records containing information about more than one student, in which case the hospital will permit access ONLY to that part of the record which pertains to the inquiring student.

Procedures to amend records and request hearings

Students who believe that their education records contain information that is inaccurate or misleading, or is otherwise in violation of their privacy or other rights may discuss their problems informally at a meeting with the author of the record and the EMS Administrative Director. If the decisions are in agreement with the student's request, the appropriate records will be amended. If not, the student will be notified within a reasonable period of time that the records will not be amended; and they will be informed by the Course Coordinator of their right to a formal hearing.

Students' requests for a formal hearing must be made in writing to the EMS Administrative Director who, within a reasonable period of time after receiving such requests, will inform students of the date, place, and the time of the hearing. Students may present evidence relevant to the issues raised and may be assisted or represented at the hearing by one or more persons of their choice, including attorneys, at the students' expense. The hearing officer who will adjudicate such challenges will be the EMS MD.

Decisions of the EMS MD will be final, will be based solely on the evidence presented at the hearing, and will consist of written statements summarizing the evidence and stating the reasons for the decision, and will be delivered to all parties concerned. The education records will be corrected or amended in accordance with the decisions of the EMS MD, if the decisions are in favor of the student.

If the decisions are unsatisfactory to the student, the student may place with the education records statements commenting on the information in the records, or statements setting forth any reason for disagreeing with the decisions of the EMS MD. The statements will be placed in the education records, maintained as part of the student's records, and released whenever the records in question are disclosed.

Students who believe that their rights have been abridged may file complaints with the Family Educational Rights and Privacy Act office, Department of Education, Washington, D.C., 20201, concerning alleged failures of the hospital to comply with the Act. For additional information, you may call 1-800-USA-LEARN (1-800-872-5327) (voice). Individuals who use TDD may use the [Federal Relay Service](#). Or you may contact us at the following address: Family Policy Compliance Office; U.S. Department of Education; 400 Maryland Avenue, SW; Washington, D.C. 20202-85