**MISSOURI HEALTH PROFESSIONS CONSORTIUM**

# Respiratory Care Program

# Student Handbook

## Class of 2027

Dear Student,

Welcome to the MHPC Respiratory Care Program! You are now beginning the one-year journey to become a Registered Respiratory Therapist (RRT). It is our hope that your education is rewarding and motivates you to embrace the role of the Respiratory Therapist and implement the highest standards of care for your clients. Our curriculum will provide the general knowledge and skills to begin your career as an entry-level Respiratory Therapist. We believe you are a mature adult learner and will participate fully in all learning activities to meet the expectations, rigor, and demands of this Program.

Please read this Student Respiratory Care Program (RCP) Handbook carefully. The intent of the Handbook is to clearly state the policies of the Program. This Student Handbook presents policies, procedures, and general information to assist you as you progress through the RCP Program. This Handbook should be used in conjunction with other official documents prepared and distributed by the consortium college you have identified as your "home" campus.

*****Please note, all policies identified within the student handbook apply to all faculty and students regardless of the location where instruction occurs (i.e., didactic, laboratory, or clinical).***

The RCP Program reserves the right to change, delete or add any information without previous notice and at its sole discretion. Furthermore, the provisions of this document are designed by the consortium colleges to serve as guidelines rather than absolute rules, and exceptions may be made based on individual circumstances. The forms you sign should be reviewed very carefully. Your acknowledgement will be submitted to the RCP Program Office, and they will be placed in your student file along with all required certifications, paperwork, and student progress reports throughout the year that you are in the Program.

We believe in the future of this career pathway and are here to help you succeed. We look forward to getting to know you better, while guiding and teaching you to become the very best Registered Respiratory Therapist.

Respectfully,

Valerie Norwood, MBA, RRT
MHPC RCP Program Director

Denise King, BSRT, RRT
MHPC RCP Director of Clinical Education

**NOTE:** ***Any changes in your home community college's Policies, Rules, and Regulations may supersede the current information in this handbook.***

## Respiratory Care Program
## Handbook Policy/Clinical Lab Acknowledgement

I, the undersigned, have received, read and fully understand the policies in the Student Handbook for the Respiratory Care Program, which was reviewed in June 2026.

I have received, read, and fully understand the College Academic Policy regarding class attendance and student conduct found in the MHPC RCP Student Handbook as well as those outlined in my "home" campus Student Handbook.

I have read and understand the Clinical Lab Guidelines. I agree to follow the guidelines at all times when in the Clinical Lab. Non-adherence to these expectations may constitute dismissal from the Clinical Lab and a failing course grade.

I fully understand that to be placed at a clinical site or to participate in clinical experiences, I must comply with all clinical site compliances (i.e. required immunizations, drug screenings, criminal background checks, etc.).

I understand that personal information may be required by the clinical sites (i.e. criminal background checks, immunizations, etc.). I give my permission for this information to be divulged for that purpose alone. (Refer to individual policies relating to personal information.)

Student Name (Print): _____

Signature: _____ Date: _____

**Notice of Non-Discrimination**
East Central College does not discriminate on the basis of race, color, religion, national origin, ancestry, gender, sexual orientation, age, disability, genetic information, or veteran status. Inquiries/concerns regarding civil rights compliance as it relates to student programs and services may be directed to the Vice President of Student Development, 131 Administration Building, 1964 Prairie Dell Road, Union, MO 63084. (636) 584-6565 or stnotice@eastcentral.edu.

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# INTRODUCTION TO THE RCP PROGRAM

# MHPC History and Overview

The Missouri Health Professions Consortium (MHPC) was established in 2008 and is governed by a board of directors comprised of the presidents of the partner community colleges. Listed below are the four goals for the MHPC's Consortium-based cooperative degree completion program.

- To increase the number of licensed healthcare professionals who will choose to live and work near their current homes
- To establish mutually accepted baseline enrollment, retention, graduation, and alumni/employer satisfaction rates
- To expand the cooperative relationships between the clinical health employers and professionals, and local community colleges
- To enhance public/private partnerships that contribute to increased accessibility to higher education between the rural Missouri community colleges

# MHPC Mission Statements

The mission of this well-established five-member Consortium serving low-income and rural students is to "expand educational opportunities, especially for students who may have limited access to affordable selected degree programs in the health professions."

The mission statement of each MHPC partner college is as follows:

- **East Central College Mission**: Empowering students and enriching communities through education.
- **Moberly Area Community College Mission:** MACC provides dynamic and accessible educational opportunities that empower our students and enrich our communities.
- **State Fair Community College Mission:** State Fair Community College provides relevant and innovative learning experiences that successfully prepare students for college transfer, career development and lifelong learning. SFCC is committed to being accessible and affordable, values collaborative partnerships, and strengthens and enriches the intellectual, economic and cultural vitality of the communities it serves.
- **North Central Missouri College Mission**: North Central Missouri College (NCMC) provides accessible, affordable, and quality educational programs, with emphasis on excellence in teaching, learning, workforce development, and service.
- **Three Rivers College Mission:** Three Rivers College inspires, prepares, and empowers students to succeed through open access to high-quality learning opportunities that meet the needs of the communities we serve.

## RCP Program Organization

The Missouri Health Professions Consortium (MHPC) Respiratory Care Practitioner Program is unique from other programs in Missouri due to the partnership and sharing of resources that help address the shortage of Respiratory Care professionals in rural Missouri. It is coordinated by East Central College and offered at five community colleges: East Central College (ECC), Moberly Area Community College (MACC), North Central Missouri College (NCMC), State Fair Community College (SFCC), and Three Rivers College (TRC). Each student admitted to the Respiratory Care Practitioner Program will select one "home" campus from among the member community colleges who offer the program of study and the degree. The admitted student is expected to enroll and pay tuition/fees directly to the "home" campus.

The MHPC RCP Program is a 1+1 program, with general education coursework required in the first year and full-time professional coursework offered in the second year. Graduates of the MHPC RCP Program are awarded an Associates of Applied Science Degree in Respiratory Care from the community college at which they enroll and attend classes. These outcomes shall be counted and reported in accountability measures such as graduation rates, retention rates, and other institutional assessments.

## Institutional Accreditation and Authorization

Each MHPC community college is authorized to deliver postsecondary education in Missouri as required under federal Title IV regulations. As public community colleges in the state of Missouri, each MHPC member community college is duly authorized to operate and grant degrees by Chapter 178 of the revised Missouri statutes. Each institution is in good standing with the Missouri Department of Higher Education & Workforce Development and is in full compliance with all the regulations and requirements of this agency. MDHEWD has the statutory authority to approve all new instructional programs established by public institutions.

DEPARTMENT OF HIGHER EDUCATION & WORKFORCE DEVELOPMENT

301 W. High Street (Suite 840, 860, 870, 580), Jefferson City, MO 65101
Phone: (573) 751-2361, Fax: (573) 751-6635, Email: info@dhewd.mo.gov

Each MHPC community college is fully accredited by the Higher Learning Commission (HLC) at the certificate and associate's degree-granting levels. Additional information related to each institution's recent accreditation history and pending schedule of evaluation is available on HLC's website.

Higher Learning Commission

230 South LaSalle Street, Suite 7-500, Chicago, Illinois 60604-1411
Phone: 800.621.7440 / 312.263.0456, Fax: 312.263.7462
Email: info@hlcommission.org

The Respiratory Care Program (Program #200690) offering an Associate's in Applied Science (AAS) degree at East Central College and the Missouri Health Profession Consortium is ***provisionally*** accredited by the **Commission on Accreditation for Respiratory Care (CoARC).** East Central College serves as the fiscal agent for the MHPC RCP Program and is located at 1964 Prairie Dell Road, Union, MO, 63084.

COARC Commission on Accreditation for Respiratory Care

264 Precision Boulevard, Telford, TN 37690
Phone: 817-283-2835, Fax: 817-354-8519
Email: webmaster@coarc.com

## NBRC Board Exam for Respiratory Care

Individuals who successfully complete the Program are eligible to take the Respiratory Therapy Exam administered by the National Board for Respiratory Care (NBRC). To obtain the NBRC ***Certified Respiratory Therapist (CRT)*** credential, graduates must pass the exam with the low-cut score. In order to obtain the NBRC ***Registered Respiratory Therapist (RRT)*** credential, graduates must pass the exam at the high-cut score. More information can be found at the NBRC's website.

NBRC
The National Board for Respiratory Care

10801 Mastin Street, Suite 300, Overland Park, KS 66210
Phone: 913-895-4900, Fax: 913-712-9283
Email: info@nbrc.org

## RCP Program Advisory Board

The MHPC Respiratory Care Program maintains a current and active group of individuals who serve in the capacity of a Program Advisory Committee. The group consists of faculty, clinical site personnel, employers, graduates, and current students. The purpose of the Committee is to exchange ideas, seek technical assistance and to make certain that the equipment, study materials and techniques taught in the Program provide the skills necessary to meet employer expectations upon graduation. The Committee meets twice each year and thoroughly reviews facilities, curriculum, and faculty.

## RCP Program Mission and Vision

The mission of the MHPC Respiratory Care Program is to educate and prepare Respiratory Care Practitioners to provide respiratory therapy services to the citizens of Missouri, especially those in rural and underserved communities. We educate and prepare RCPs, to have the knowledge, skills, attitudes, compassion, and professional behaviors that are necessary to work in both traditional and emerging areas of practice.

The RCP Program's vision is to be recognized as a leader in innovative strategies for Respiratory Care Therapy education. Through a combination of distance and on-site education opportunities and experiences, we envision a core of highly skilled, motivated and educated Respiratory Care Practitioners who will serve the citizens of Missouri.

## RCP Program Philosophy

To become a member of a trustworthy Allied Health profession, there are several essential requirements, including responsibility, accountability, knowledge, skill, and safety. A patient places trust in health care providers and they, in turn, must be worthy of that trust. The Respiratory Care Practitioner Program has a responsibility to the public to ensure that its students and graduates are competent in all of these areas and at the appropriate level. Because patients put their lives in the hands of the RCP, the MHPC believes that the profession of Respiratory Therapy is highly respected and that communities have a need for more Respiratory Care Practitioners.

## Notice Of Non-Discrimination

The Missouri Health Professions Consortium and its member institutions do not discriminate on the basis of race, color, religion, sexual orientation, genetics, national origin, ancestry, gender, age, disability, veteran status, and marital or parental status in admissions, programs and activities, and employment. The MHPC RCP Program supports and upholds the policies of the partnering community colleges. The student's "home" campus is the point of contact for issues related to discrimination, and any inquiries should be directed there. If the student has difficulty identifying the appropriate contact at his/her respective college, the MHPC RCP Program Faculty and Program Director will assist him/her with making contact and accessing needed services.

## MHPC Title IX Statement

The MHPC RCP Program will not tolerate a hostile environment, thus prohibiting sexual misconduct in any form, including sexual harassment, sexual discrimination, and sexual violence.

## Intellectual Pluralism

The MHPC RCP Program welcomes intellectual diversity and respects student rights. Students who have questions or concerns regarding the atmosphere in this class (including respect for diverse opinions) may contact the Program Director or Administrative Representative at their "home" campus. (All students will have the opportunity to submit an anonymous evaluation of the instructor(s) at the end of the course.)

# RCP PROGRAM OVERVIEW

# RCP Program Information

The Respiratory Care Practitioner Program is a 69-**credit hour** program (including pre-requisites) that encompasses general education coursework, professional-level coursework, classroom, laboratory practice, and clinical experiences in a variety of local hospitals and facilities. Once selected for admission into the program, students should complete the full-time RCP Program in one year. General education courses may be completed on a full-time or part-time basis prior to entering the program. Upon graduation, students receive an Associate of Applied Science Degree in Respiratory Care which prepares them to obtain the Registered Respiratory Therapy (RRT) credential. To be a Registered Respiratory Therapist (RRT) and to become state licensed as a Respiratory Care Practitioner, a student must successfully complete the Respiratory Therapy Exam administered by the National Board for Respiratory Care (NBRC)

# General Education Coursework Requirements

Prior to beginning the Respiratory Care Practitioner Program in August, students must successfully complete the following general education courses with a "C" or better and maintain a minimum 2.75 GPA or higher in the required general education coursework listed below. Some coursework may require prerequisite study. Students should consult the community college catalog or an academic advisor to ensure they are taking the correct coursework. ***Anatomy and Physiology coursework must have been completed no more than 5 years prior to enrolling in the RCP Program.***

| Course Requirement | Course Equivalency at Each Community College | | | | |
|---|---|---|---|---|---|
| | **ECC** | **MACC** | **NCMC** | **SFCC** | **TRC** |
| Core 42 Written Communication (English Composition I, 3 credits) | ENG101 | LAL101 | EN101 | ENGL101 | ENGL111 |
| Core 42 Oral Communication (Oral Comm or Public Speaking, 3 credits) | COM101 or COM110 | SPK101 | SP175 or SP220 | COMM101 or COMM103 or COMM105 or COMM190 | SCOM101 or SCOM110 |
| Human Anatomy w/Lab or HAPI (4-5 credits)* | BIO206 | BIO205 | BI240 | BIO207 | BIOL231 |
| Human Physiology w/Lab or HAPII (4-5 credits)* | BIO207 | BIO209 | BI242 | BIO208 | BIOL232 |
| CORE 42 Civics (US & State Constitution Requirement: American History or US Government, 3 credits)** | HST101, HST102 or PSC102 | HST105, HST106 or PSC105 | HI103, HI104 or PL216 | HIST101, HIST102 or POLS101 | GOVT121 |
| General Psychology (3 credits) | PSY101 | PSY101 | PY121 | PSY101 | PSYC111 |
| Medical Terminology (3 credits) | HSC113 | HSC171 | AH160 | HEOC119 | ALHE125 or IST149 |
| Math Requirement (Intermediate Algebra or higher, 3 credits) | MTH110, MTH140, MTH150 or MTH160 | MTH140, Precalculus, Algebra or higher | MT110 | MATH110 or MATH112 | MATH153 or MATH163 |

*Table 0-1 General Education Coursework Requirements Matrix*

*The Anatomy and Physiology coursework is a sequence of two courses that includes a lab component. Depending on the college, the two courses may be called, "Human Anatomy with Lab" and "Physiology with Lab", or the courses may be called, "Human Anatomy and Physiology I" and "Human Anatomy and

Physiology II". Both courses must be taken at the same college for the coursework to be considered for transfer credit. The home campus community college has ultimate responsibility for determining transfer credit equivalencies.

**Students may be required to complete 1-3 credit hour first-year experience courses as well as the Civics Achievement Exam as part of the pre-requisite coursework. Each MHPC member college will determine those courses or equivalencies.

Students may submit their RCP Program Application prior to completing all the general education classes. In this case, offers for program admission are contingent upon the applicant completing the remaining coursework during the Spring and Summer Semesters, while maintaining the minimum 2.75 GPA or higher, before Respiratory Care classes begin in August. **Students selected for admission to the Program must submit proof (official transcripts) of general education course completion to the MHPC RCP Program Office prior to beginning Respiratory Care classes in August.**

General education classes may be completed at colleges other than the MHPC partner community college. **Transfer credit is determined by each MHPC partner community college and students should not presume that all general education courses taken at another college will transfer as the equivalent to MHPC partner college coursework.**

An Associate of Applied Science Degree in Respiratory Care is the first step in the profession of respiratory care. This degree prepares a student to begin further studies (through University Programs) and to progress in the profession with a Bachelor of Science Degree, a Master's Degree, or a Doctoral Degree, if the student chooses to do so.

The MHPC RCP Program curriculum includes **LIVE** virtual classroom instruction (3-4 days/week), on-campus laboratory instruction in Columbia or Union as designated (1 day/week) and Clinical (2 days/week). The **LIVE** virtual classroom lecture components are taught by MHPC Respiratory Care faculty and is broadcast to the students using distance education technology. This technology may include, but not be limited to Zoom, Canvas, and other video streaming technology in a combination of synchronous and asynchronous delivery. These classes require mandatory attendance.

To complete the required laboratory component of the Program, it is important to note that students will be required to travel to either Columbia or Union one day each week, meeting face-to-face with an instructor. Every effort will be made to assign students to the lab location nearest their residence; ***however,*** due to enrollment capacity, faculty availability, clinical scheduling, and other operational factors, placement at the closest lab location is not guaranteed and students will be assigned an alternate lab location. There will be times during each semester that all students will need to travel to the Union lab location.

The Clinical coursework of the MHPC RCP Program takes place in off-campus clinical settings. Students should be prepared to drive a minimum of one hour each way to their clinical site location. Local RRT clinicians serve as the Clinical Instructors and Clinical Preceptors who will supervise the Respiratory Care students during the required clinical rotations.

Each student admitted to the RCP Program will enroll in one "home" campus from among the member community colleges offering the program of study. The admitted student is expected to enroll and pay tuition and fees directly to the "home" campus. Once a student completes all Program requirements, the "home" campus shall grant and confer the student's degree, and these outcomes shall be collected and reported in accountability measures such as graduation rates, retention rates, and other institutional assessments.

The MHPC RCP Program is full-time only, with courses offered in a specific sequence. Each spring, students will be selected to begin the Program during the following August. The professional year of the Program (Respiratory coursework) is designed to be completed within 12 months (three 16-week semesters) beginning in August and ending in August.

## RCP Program Goal

The primary goal of the MHPC Respiratory Care Practitioner Program is to prepare graduates with demonstrated competence in the cognitive (knowledge), psychomotor (skills), and the affective (behavior) domains of the Respiratory Care Practice as performed by Registered Respiratory Therapists (RRTs).

## Student Program Learning Outcomes (PLOS)

- **Utilize Critical Thinking/Problem-Solving Skills**
  Graduates will demonstrate proficiency in critical thinking and problem-solving to aid in the accurate diagnosis, effective management, and treatment of patients with cardiopulmonary diseases.

- **Evaluate Assessment Data and Apply Interventions**
  Graduates will be able to systematically evaluate assessment data, apply appropriate interventions, and administer prescribed respiratory care to patients with cardiopulmonary diseases, ensuring optimal patient outcomes.

- **Demonstrate Technical Proficiency**
  Graduates will exhibit technical proficiency in all required skills, performing their roles as Registered Respiratory Therapists safely and effectively.

- **Educate Various Stakeholders**
  Graduates will possess the ability to foster health literacy by educating patients, their families, healthcare professionals, and community members on matters related to cardiopulmonary wellness, disease prevention, and management.

- **Communication Skills**
  Graduates will recognize, demonstrate, and apply written and oral communication skills essential for effective interaction in the healthcare setting. This includes communicating with patients, colleagues, and other healthcare professionals.

- **Professional Ethics and Legal Compliance**
  Graduates will practice within the registered respiratory therapist's professional moral, ethical, legal, and regulatory framework. This includes adhering to established standards of conduct, ensuring patient confidentiality, and maintaining the highest level of professionalism.

Upon completion of the MHPC Respiratory Care Program, the student will earn the AAS in Respiratory Care Degree which prepares them to practice as a Registered Respiratory Therapist (RRT) and to become state licensed as a Respiratory Care Practitioner after successfully completing the Respiratory Therapy Exam administered by the National Board for Respiratory Care (NBRC) to obtain the Registered Respiratory Therapy (RRT) credential.

## Technical Performance Standards

- Participate in lab activities that require hands-on contact with a manikin and close working quarters with peers.
- Speak and understand the English language at a level consistent with competent professional practice.
- Observe and interpret signs and symptoms through visual, auditory, and tactile feedback. Students must possess functional use of the senses that permit such observation.
- Utilize hand and mechanical tools safely and effectively.
- Exhibit sufficient postural and neuromuscular control, sensory function, and coordination to safely and accurately provide remediation.
- Demonstrate the use of accepted techniques accurately and safely when using equipment and materials of the profession.
- Participate in physical activity involving lifting of approximately 50 lbs., bending, moving and safely supporting others in transfer.
- Communicate effectively and sensitively with patients and colleagues, including individuals from different cultural and social backgrounds.
- Communicate judgments and treatment information effectively, with appropriate confidentiality.
- Demonstrate appropriate behaviors and skills in classroom and fieldwork during interactions with faculty, other students, fieldwork coordinator, fieldwork supervisors and professional colleagues.
- Demonstrate the mental capacity to assimilate, analyze, synthesize, integrate concepts, and problem solve to perform therapeutic interventions.

# RCP Essential Functions/Physical and Mental Standards

The Respiratory Care Program requires sufficient agility and strength to move from room to room, lift and position patients, maneuver in small places, and perform clinical services. Students must possess gross and fine motor abilities as well as auditory, visual, and tactile acuity, which are required to assess health status and perform effective patient care. To achieve the necessary requirements for issuance of an Associate of Applied Science Degree in Respiratory Care, the graduate must meet technical skills with or without reasonable accommodations. Students with disabilities who believe that they may need an accommodation are encouraged to contact the Access Office at their "home" campus to ensure that such accommodations are implemented in a timely fashion. See the chart below for specific requirements of the Respiratory Care Program.

**Frequency: O = Occasionally (1-33%), F = Frequently (34-66%), C = Constantly (67-100%)**

| **Physical Stamina Required (Description):** | **Frequency** |
|---|---|
| Lift - up to 50 lbs. to assist in moving patients, supplies, equipment<br>Lift - up to 200 lb. when moving patients | F<br>O |
| Stoop - adjust equipment | F |
| Kneel - manipulate equipment, perform CPR, plug in electrical equipment | O |
| Reach - overhead lights, equipment, cabinets; attach oxygen to outlets; stocking | C |
| Motor skills, manual dexterity - small and large equipment for storing, moving; apply sterile gloves; take BP; operate computers; perform CPR; utilize syringes, tubes, catheters; set up and maintain sterile field | C |
| Stand - prolonged periods of time (to deliver therapy, check equipment and patient, perform surgical procedures) | C |
| Climb - stairs, responding quickly to an emergency on another floor when elevators are unavailable or full | O |
| Feel - palpate pulses; perform physical exams; feel arteries or veins for puncture; assess skin temperature | C |
| Push/Pull - large, wheeled equipment, i.e. mechanical ventilators, wheelchairs, patients, x-ray, equipment, EKG machines, and office equipment | C |
| Walk - extended periods of time | C |
| Walk quickly or run to respond to emergency calls or assist in critically ill patient transports | C |
| Manipulate - knobs, dials associated with diagnostic or therapeutic devices, small instruments, syringes | O |
| Respond - verbal directions, alarms, telephone; hear through a stethoscope for heart sounds, lung sounds, and blood pressure | C |
| Assess - patient conditions such as skin color, work of breathing; read small print and calibration on equipment; perceive color | C |
| Communicate Orally - goals and procedures to patients in English | C |
| Communicate In Writing - pertinent information (patient assessment, outcome assessments) in English | C |
| Comprehend - typed, handwritten, computer information in English | C |
| | |
| **Mental Attitude (Description):** | |
| Function safely, effectively, and calmly under stressful situations. | C |
| Maintain composure and concentration while managing multiple tasks simultaneously. | C |
| Prioritize multiple tasks. | C |
| Possess social skills necessary to interact with patients, families, and co-workers of diverse cultures; to be respectful, polite, and discrete; and to able to work as a team. | C |
| Maintain personal hygiene consistent with close contact during direct patient care. | C |
| Display actions and attitudes consistent with ethical standards of the profession. | C |
| Exposure to blood borne pathogens – Hepatitis, HIV. | F |
| Exposure to blood air borne pathogens – Influenza, TB, Pertussis, RSV, Covid. | F |

*Table 0-2 RCP Essential Functions/Physical and Mental Standards*

# RCP Program Admission Criteria

For acceptance into the MHPC Respiratory Care Practitioner Program, a student should **apply for and be admitted to a MHPC partner college and also complete the MHPC Respiratory Care Program Application**. The completed application should be submitted to East Central College Respiratory Care Program at 1964 Prairie Dell Road, Suite 105, Union, MO, 63084.

**Applicants must also meet the minimum criteria listed below.**

- **Minimum cumulative GPA of 2.75 or greater on a minimum of 12 credit hours of college credit.** (A GPA of 3.0 or higher is suggested.)
- **TEAS Admission Test Score of 65% or greater in the last two years. *It is the student's responsibility to provide our office with a copy of his/her TEAS results.*** The TEAS exam is designed to assess a student's academic and personal readiness for higher education in a healthcare-related field, such as Respiratory Care. The test is an internet-based, timed, multiple-choice test evaluating a student's knowledge in the following categories: English language, grammar, vocabulary, math, human anatomy & physiology, life & physical sciences, and scientific reasoning. Tests are not individually timed during testing. A student will have 4-1/2 hours to complete the test, so pacing oneself is very important. Students will need to schedule the exam at the campus testing center that has been identified as their "home" campus.
- **Prerequisite coursework completed with a "C" or better.** Prerequisite coursework ***must be completed by the end of the Summer Semester (August) before Fall admission into the program.*** (See the curriculum page in the Application Packet for more details.) All science courses must be no older than 5 years at the time of acceptance.
- **Minimum of 16 hours observation with an RRT**. Observation must be completed at a hospital, skilled nursing/long term care facility, or pulmonary function laboratories.
- **Three (3) appropriate references on file.** (See application for guidelines regarding references).
- **Unofficial transcripts received and evaluated for the program, as well as proof of enrollment, if coursework is taken at another institution.** Applications will not be considered if unofficial transcripts have not been evaluated by June 1st.

Upon acceptance into the Respiratory Care Program, the student will be required to complete the items listed below.

- **Satisfactory Drug Screening.** The testing site is determined by MHPC RCP Program.
- **Satisfactory Medical Examination.** Applicants must be in a state of physical and mental health compatible with the responsibilities of a Registered Respiratory Therapist. A physical examination, including selected diagnostic tests and immunizations, is required after program acceptance at the cost of the applicant. (The examination form is provided in the acceptance packet and is to be completed by the Healthcare Professional.)
- **Satisfactory Fingerprint/Criminal Background Check.** (Family Care Safety Registry form will be included in the Application Packet.)

Once the student has been accepted into the MHPC Respiratory Care Program (RCP) and all prerequisites have been completed with satisfactory grades, the student will be eligible to register for the classes required for the professional phase of the Program. All RCP students are subject to the procedures of registration as published in their "home" campus student handbook and therefore should refer to their "home" campus student handbook for registration specifics.

# RCP Program Selection Process

Enrollment in the MHPC Respiratory Care Program is limited and the Program may not be able to offer admission to all qualified applicants. ***Only students meeting all admission criteria and submitting all required application items by the application deadline will be considered.*** Completed applications will be evaluated utilizing selection criteria established in advance by the Program Director and Respiratory Care Admissions Committee.

Application review begins as soon as materials arrive at the Respiratory Care Program office. Each requirement for admission has a point value attached (GPA, general education coursework, observation, recommendation, Teas Exam, etc.), and a screening score determines the preliminary ranking of applicants (paper review). Guidelines for ranking applicants are listed below.

| Coursework Completed | TEAS Exam | GPA | RRT Observations |
|---|---|---|---|
| Grade from Anatomy & Physiology I&II if completed by May 31st with a "C" or better.<br><br>3 = A<br>2 = B<br>1 = C<br><br>*No points will be given for courses that have been retaken due to course failure.* | Individual Composite Score<br><br>0 = 65.0<br>2 = 65.1 - 69.9<br>4 = 70.1 - 74.9<br>6 = 68.1 - 73.0<br>8 = >75 | **Accumulated college GPA of a minimum of 12 credit hours of college credit**<br><br>2.75 = 0<br>2.76 – 2.9 = 2<br>3.0 – 3.5 = 4<br>3.6 – 4.0 = 6 | **A minimum of 8 hours of RRT observation** at a skilled nursing/long-term care facility, hospital, or pulmonary function lab **is required**.<br><br>0 = 16 hours<br>2 = 24 hours<br><br>*Other clinical facilities can be utilized after the minimum requirement is met.* |

*Table 0-3 Guidelines for ranking applicants*

** Admission criteria are subject to change; however, all applicants will be notified of changes should they occur.*

***It is the responsibility of the student to maintain communication with the MHPC Respiratory Care Program Office to ensure that the application folder is complete and up to date with current admission requirements.*** Admission to the program is **competitive in nature** and **is not guaranteed**. A selection committee ranks all applications, and admission is granted to the most qualified applicants. Applicants can improve their chances of admission by maintaining a high GPA, completing pre- and co-requisite courses and scoring high on the TEAS entrance exam. **S*atisfactorily, meeting minimum requirements does not automatically guarantee admission.***

The MHPC Respiratory Care Practitioner Program office will notify the candidates of the Admission Committee decision by email as to whether they are selected for the RCP Program admission. Students selected for the Respiratory Care Class will be required to complete the Respiratory Care Admissions Packet items (drug screen, background check, physical exam, immunizations, etc) during the summer semester prior to beginning Respiratory Care Classes in August.

## Mandatory Orientation

Students selected for Program admission must attend a ***mandatory*** one-day orientation session. Students will be notified of the orientation details upon acceptance of the Program. Bringing the entire class together on the same day will allow for a faculty/student meet & greet prior to the start of Respiratory Care Practitioner Program classes in August. The group will review the Respiratory Care Student Handbook; policies and procedures; training on the technology and course delivery platform; student roles and responsibilities; dress codes and equipment; and class schedules for the year.

## RCP Program Faculty & Staff

Faculty members are available to meet with students during regularly scheduled office hours and by appointment. The hours of each faculty member will be posted outside the office and included in each Canvas course prior to the beginning of each semester. Students are expected to exercise courtesy and patience when an instructor is on the telephone or involved in a conference with another student or instructor. The instructor will then see the student as soon as the situation allows. Instructors will schedule an appointment with a student at either the student's or instructor's request. If the student is unable to keep the appointment, the student is expected to notify the instructor as soon as possible.

***PROGRAM DIRECTOR:***
Valerie Norwood, MBA, RRT
Instructor of Respiratory Care
Email: Valerie.norwood@eastcentral.edu
636-584-6145

***MEDICAL DIRECTORS:***
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Dr. David Tannehill, MD

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Michelle North
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## Criminal History Policy

As a requirement of the application process for the MHPC Respiratory Care Practitioner Program, in response to RSMo 334.870 and 334.890, students accepted into the Program will be required to consent to release their criminal history records (RSMo 43.450) for the sole purpose of determining the applicant's ability to enter patient care areas in order to fulfill the requirements of the Respiratory Care Practitioner Program. Any student who is found to have a criminal history for a felony conviction, as defined by state law, or is found to be on one of the governmental sanction lists, will not be accepted nor allowed to continue enrollment in the MHPC Respiratory Care Program. Acceptance into and completion of the Program does not guarantee licensure. In addition, **any conviction may affect a student's ability to be placed in a clinical site and a graduate's ability to sit for the Respiratory Therapy Exam administered by the National Board for Respiratory Care (NBRC) or attain State Licensure.** ***Students currently serving probation are ineligible for admission and may be ineligible for admission if the criminal offense is recent in nature.***

## Drug Screening Policy

The purpose of the MHPC Drug Screening Policy is to comply with the Drug-Free Schools and Communities Act Amendments of 1989 and to ensure that students entering the Program are drug- and alcohol-free. Offers of acceptance to the Respiratory Care Program are made as conditional offers. Applicants may be denied admittance if a positive drug screen is detected. An applicant who refuses to authorize and pay for testing, or who tests positive for drugs, alcohol, or controlled substances, may not receive a final offer of admission. A current Respiratory Care student who refuses to authorize and pay for testing, or who tests positive for drugs, alcohol, or controlled substances, may not be allowed to continue in the Program. A positive drug screen during the professional years may disqualify a student from participating in required coursework involving client interaction and will affect the student's ability to complete the Program.

## Transfer Student Policy

Students transferring from another Respiratory Care Practitioner Program must follow all admission policies and procedures required by the MHPC partner colleges and the Program. Transfer of general education courses will be completed through the transfer evaluation process during the time of application to the college. ***No Respiratory Care Program courses will be approved for transfer.***

# STUDENT SUPPORT SERVICES

## Academic Support and Counseling

Students have access to their "home" support services such as tutoring, counseling, wellness, and Access needs. Each campus offers comprehensive services to support student learning either face-to-face or virtually. Students should contact their "home" campus to meet with a tutor, watch a course video, DVD or tutorial. "Home" campuses can also give students help with PowerPoint, setting up a study group, or accessing Canvas. Below are the links to the campus support services at each MHPC Partner College.

East Central College
- Learning Center
- Wellness & Counseling Services

Moberly Area Community College
- Counseling & Community Resources
- Tutoring Services

North Central Missouri College
- Tutoring Center
- Health Wellness & Safety
- Counseling Services

State Fair Community College
- SFCC Cares Health and Wellness Services
- Tutoring Services

Three Rivers College
- Tutoring
- Health & Safety

## Access Services and ADA Accommodations

The MHPC RCP Program will comply with the Americans with Disabilities Act (ADA) and supports and upholds the policies of the partnering community colleges. Any student who has a health concern or other disability that prevents the fullest expression of academic abilities should contact Access Services as soon as possible at their respective "home" campus. Appropriate reasonable accommodations will be made for qualified individuals with disabilities in accordance with federal regulations, ***unless doing so would pose an undue burden on the institution's resources or would fundamentally alter the nature of the Program***. Students having special needs as addressed by the Americans with Disabilities Act (ADA) should notify the course instructor immediately and contact the Access/ADA Office at the "home" campus to confidentially discuss disability information, academic accommodations, appropriate documentation and procedures. Students with disabilities that qualify under the Americans with Disabilities Act (ADA) should register with their "home" campus if requesting accommodations and/or assistance. Below are the links to the Access/ADA Office at each MHPC Partner College. If the student has difficulty identifying the appropriate contact at his/her respective college, the MHPC RCP Program Faculty and Program Director will assist him/her with making contact and accessing needed services.

- East Central College - Access Services
- Moberly Area Community College - Access and ADA
- North Central Missouri College - Accessibility Services
- State Fair Community College - Disability Resource Center
- Three Rivers College - Disability Services

# RCP Program Advisors

Students who have declared the intent to major in the AAS Degree in Respiratory Care Program are assigned a faculty advisor from the corresponding "home" campus who has knowledge and understanding specific to the MHPC RCP Program requirements. The role of the advisor is to review student transcripts and prerequisite coursework to make sure the student is taking the correct courses and performing academically at a level that will make them a viable candidate for the MHPC RCP Program. The Academic Advisors work in collaboration with the MHPC RCP Program Director and Admissions Coordinator to prepare students for a successful application process. This advisor will assist in planning the educational program, aid with scholastic problems, and serve as a resource for opportunities and options on campus (i.e. Learning Center, Counseling Services, and Financial Aid). In addition, students will have access to the RCP Program Director through virtual informational sessions, e-mail, phone contact, and scheduled meetings facilitated by the "home" campus. Prospective students are invited to contact the MHPC Admissions Coordinator to receive feedback on admissions processes and policies.

# CURRICULUM

## RCP Professional Coursework

| TERM | COURSE CODE | COURSE TITLE | CREDIT HOURS |
|---|---|---|---|
| **FALL** | RSC 101 | Fundamentals of Respiratory Care | 3 |
| **FALL** | RSC 110 | Respiratory Physiology | 3 |
| **FALL** | RSC 115 | Respiratory Equipment & Therapeutics | 3 |
| **FALL** | RSC 120 | Respiratory Care Clinical I | 1 |
| **FALL** | RSC 121 | Respiratory Care Lab I | 2 |
| **FALL** | RSC 165 | Respiratory Pharmacology | 2 |
| **SPRING** | RSC 105 | Introduction to Respiratory Disease | 3 |
| **SPRING** | RSC 155 | Mechanical Ventilation | 3 |
| **SPRING** | RSC 160 | Cardiopulmonary Diagnostics | 3 |
| **SPRING** | RSC 170 | Respiratory Care Clinical II | 2 |
| **SPRING** | RSC 171 | Respiratory Care Lab II | 1 |
| **SPRING** | RSC 205 | Specialized Procedures | 3 |
| **SUMMER** | RSC 150 | Advanced Respiratory Care | 3 |
| **SUMMER** | RSC 201 | Neonatal & Pediatric Respiratory Care | 3 |
| **SUMMER** | RSC 220 | Respiratory Care Clinical III | 3 |
| **SUMMER** | RSC 221 | Respiratory Care Lab III | 1 |
| **SUMMER** | RSC 291 | Respiratory Care Capstone | 2 |

*Table 0-1 RCP Curriculum*

# RCP Course Descriptions

**RSC 101 Fundamentals of Respiratory Care**
**This course introduces the foundational principles of respiratory therapy and prepares students with the essential knowledge to become competent respiratory therapists. Students will examine the history and development of the respiratory care profession while gaining an understanding of core concepts such as patient assessment, safety protocols, infection control, quality of care, and ethical responsibilities.

**RSC 105 Introduction to Respiratory Disease**
**This course introduces students to a variety of pulmonary diseases, emphasizing their pathophysiology, etiology, cardiopulmonary symptoms, and disease management.

**RSC 110 Respiratory Physiology**
**This course introduces students to the normal anatomy and physiology of the cardiopulmonary system. Emphasis will be on the importance of heart and lung relationship. Topics covers will include conduction system of the heart, normal and abnormal electrocardiogram rhythms, and acid-base status.

**RSC 115 Respiratory Equipment & Therapeutics**
**This course provides an overview of the equipment and therapeutic techniques used in the delivery of respiratory care. Emphasis is placed on the selection, operation, and troubleshooting of equipment, as well as the clinical application of therapies in treating patients with acute and chronic cardiopulmonary conditions.

**RSC 120 Respiratory Clinical I**
**This introductory clinical course provides students with their first supervised experience in patient care within a healthcare setting. Students will apply basic respiratory therapy skills such as patient assessment, vital sign monitoring, oxygen therapy, and infection control. Emphasis is placed on developing clinical competence, communication, professionalism, and adherence to safety and ethical standards.

**RSC 121 Respiratory Lab I**
**This introductory laboratory course offers students foundational hands-on experience in respiratory therapy. Students will learn basic clinical skills including vital sign measurement, patient assessment, proper use of basic respiratory equipment, oxygen delivery methods, and infection control procedures. The lab emphasizes safety, accuracy, and professional conduct as students begin to develop the competencies required for entry into clinical practice.

**RSC 150 Advanced Respiratory Care**
**This course focuses on the advanced principles and practices of respiratory care in critical care settings. Students will explore complex cardiopulmonary pathologies, advanced airway management, and the application of invasive and non-invasive mechanical ventilation strategies.

**RSC 155 Mechanical Ventilation**
**This course focuses on mechanical ventilation. Students will learn indications, modes, physiological effects, and complications of mechanical ventilation. Students will gain an understanding of the importance of assessment for liberating patients from ventilatory support.

**RSC 160 Cardiopulmonary Diagnostics**
**This course provides an in-depth study of diagnostic procedures used to evaluate cardiopulmonary function in clinical settings. Students will learn the principles and applications of imaging interpretation, invasive Cardiac Monitoring, and hemodynamic monitoring. Emphasis is placed on hospital-based procedures, data analysis, and the integration of diagnostic findings.

**RSC 165 Respiratory Pharmacology**
**This course introduces the principles of pharmacology as they apply to respiratory care. Students will study drug classifications, mechanisms of action, indications, contraindications, and side effects of medications commonly used in the treatment of cardiopulmonary diseases. Emphasis is placed on bronchodilators, corticosteroids, mucolytics, antibiotics, and emergency medications. The course also covers routes of administration and dosage calculations.

**RSC 170 Respiratory Care Clinical II**
**This intermediate clinical course builds upon foundational skills as students will perform advanced respiratory procedures such as airway management, bronchial hygiene therapy, aerosol and medication delivery, and ventilator monitoring. Emphasis is placed on clinical decision-making, critical thinking, and professional communication while managing care for patients with acute and chronic cardiopulmonary conditions.

**RSC 171 Respiratory Lab II**
**This hands-on lab course provides practical experience in the setup, operation, and troubleshooting of mechanical ventilators. Students will apply concepts learned in theory courses by applying previous knowledge with various ventilator modes and settings in simulated clinical scenarios. Emphasis is placed on patient-ventilator interaction, monitoring techniques, alarm identifications, and patient specific adjustments.

**RSC 201 Neonatal & Pediatric Respiratory Care**
**The course prepares students to provide specialized, safe, and effective respiratory care of neonatal and pediatrics in intensive care settings. Students will learn to apply age-appropriate techniques in airway management, oxygen therapy, mechanical ventilation, and resuscitation. Emphasis is placed on developmental physiology and equipment selection.

**RSC 205 Specialized Respiratory Procedures**
**This course introduces students to advanced diagnostic techniques in respiratory care, with a focus on pulmonary function testing and specialty practice areas. Students will interpret spirometry, lung volumes, and diffusion studies in accordance with clinical standards. The course also explores roles in specialty areas such as pulmonary rehabilitation, sleep diagnostics, home care, and long-term care.

**RSC 220 Respiratory Care Clinical III**
**This advanced clinical course prepares students for entry-level practice as respiratory therapists by providing immersive experience in a variety of acute and critical care settings. Students will demonstrate proficiency in ventilator management, arterial blood gas interpretation, airway care, and the implementation of complex therapeutic modalities. Emphasis is placed on independent clinical judgment, and interdisciplinary collaboration. Students are expected to function with a high level of competence and professionalism as they transition from supervised learning to professional readiness.

**RSC 221 Respiratory Lab III**
**This advanced laboratory course provides hands-on training in Specialty areas of care. Students will practice advanced respiratory skills including neonatal resuscitation, pediatric airway management, ventilator setup and management for all age groups. Emphasis is placed on age-specific assessment, equipment selection, simulation-based scenarios, and interdisciplinary team communication. This course prepares students for high-acuity clinical environments by reinforcing critical thinking, technical proficiency, and clinical decision-making.

**RSC 291 Respiratory Care Capstone**
**This course is designed to prepare students for the National Board of Respiratory Care exams. Emphasis is placed on interview styles, preparation for credentialing exams, and the development of a professional portfolio highlighting their employability skills as they transition from student to professional.

# RSC Program Academic Calendar 2026-2027

The MHPC Respiratory Care Program does not run on the same academic calendar as traditional college programs. ***Students should refer to their "home campus" academic calendar for enrollment and drop dates.*** The academic calendar for the Respiratory Care Class of 2027 is as follows:

| **Fall Session 2026** | **16-week** | **First 8-week** | **Second 8-week** |
|---|---|---|---|
| Classes Begin | August 24, 2026 | August 24, 2026 | October 19, 2026 |
| Labor Day (Closed) | September 7, 2026 | September 7, 2026 | |
| Fall Break (Closed) | October 15-16, 2026 | | |
| Thanksgiving Break (Closed) | November 25-27, 2026 | | November 25-27, 2026 |
| Final Exams | December 10-16, 2026 | October 14, 2026 | December 10-16, 2026 |

*Table 0-2 Fall Session Schedule*

| **Spring Session 2027** | **16-week** |
|---|---|
| Classes Begin | January 4, 2027 |
| Martin Luther King (Closed) | January 18, 2027 |
| Spring Break (Closed) | March 15-19, 2027 |
| Spring Holiday (Closed) | March 26, 2027 |
| Final Exams | April 26-30, 2027 |

*Table 0-3 Spring Session Schedule*

| **Summer Session 2027** | **16-week** |
|---|---|
| Classes Begin | May 3, 2027 |
| Memorial Day (Closed) | May 24, 2027 |
| Independence Day (Closed) | July 2, 2027 |
| Final Exams | August 16-20, 2027 |

*Table 0-4 Summer Session Schedule*

# Tuition And Fees Guidelines

Tuition and Fees for the MHPC Respiratory Practitioner Program are consistent with policies and procedures established by the participating Consortium colleges. It is the duty of the Program Director and MHPC Governing Board of Directors (presidents) to ensure ongoing continuity and consistency between campuses within a reasonable degree of variation. The following guidelines are intended to assist students in addressing general tuition and fees related to payment and financial aid.

**General:**

- Students will be billed for all tuition and fees through the home campus registrars and cashiers as established by community college specific policies and procedures.

- Students matriculated into the Consortium program will enroll at the student's "home campus" community college and will pay the required tuition and fees to the home campus.

- All pre-requisite general education and science coursework taken prior to a student's formal admission to the Consortium program shall be paid in the same manner as other native students attending the "home" community college campus.

**Financial Aid:**

- It is generally understood that once admitted to the consortium program, students are counted and reported as students of the "home" community college. This process shall determine the student "home-campus" for federal and state financial aid eligibility and account service. It is the intent of this Consortium agreement that all financial aid services shall be provided by the "home" community college.

- Refund Policies of MHPC Community College Partners
  - ECC Refund Policies
  - MACC Refund Policies
  - NCMC Refund Policies
  - SFCC Refund Policies
  - TRC SR 2750 Return of Title IV Information

**Non-Curricular Student Activities and Events:**

- Students accepted into the Consortium program will be afforded the same access rights to non-curricular events and activities as those afforded to other currently enrolled native students on the "home campus". This understanding will enable these students to participate in community college intercollegiate athletics, student activities and organizations, use the recreation facilities, library, residence halls, etc. All appropriate fees will be covered by the tuition/fees charged by the "home" member Consortium community college.

# Estimated Itemized Expenses

Tuition and Fees for the MHPC RCP Program (professional coursework) will be higher than general education costs at the home campus. This is an ***estimate*** of student costs associated with the Program, including tuition, books, supplies, immunizations, and training/certifications for the Class of 2027.

| Student Fee | Paid To | Cost |
|---|---|---|
| A **Non-refundable** Admission Packet Fee<br>• Drug Screen<br>• Missouri Family Care Registry (FCRS) Background Screening<br>• Student Liability Insurance | Paid to East Central College | Waived for AY 26-27 |
| Physical Exam & Immunizations (estimate) | Paid to Vendor | $200 |
| AHA "BLS for Healthcare Providers" Certification | Paid to Vendor | $100 |
| AHA "ACLS" Advance Cardiac Life Support | Paid to Vendor | $100 |

*Table 0-5 Student Fees*

| **MHPC Tuition for Academic Year 2026-2027** | $286 per credit hour |
|---|---|
| **FALL SEMESTER: 14 Credit Hours** | |
| MHPC Tuition | $ 4,004.00 |
| Lab Supply Fee (RSC 121) | 100.00 |
| AARC/MSRC Student Membership (RSC 101) | 25.00 |
| Books (approximate, purchased through home campus bookstore) | 1,200.00 |
| Watch w/2nd Hand, Shoes, Stethoscope, Scrubs, etc.. | 300.00 |
| **Total Fall Semester:** | $ 5,629.00 |
| **SPRING SEMESTER: 15 Credit Hours** | |
| MHPC Tuition, Support Services/Student Activity/Tech/Facilities/Security Fees | $ 4,290.00 |
| Lab Supply Fee (RSC 171) | 100.00 |
| AARC/MSRC Student Conference Fee (RSC 150) | 200.00 |
| Books (approximate, purchased through home campus bookstore) | 600.00 |
| **Total Spring Semester:** | $ 5,190.00 |
| **SUMMER SEMESTER: 12 Credit Hours** | |
| MHPC Tuition, Support Services/Student Activity/Tech/Facilities/Security Fees | $ 3,432.00 |
| Lab Supply Fee (RSC 221) | 100.00 |
| Books (approximate, purchased through home campus bookstore) | 500.00 |
| SAE Practice Exam A & B Fee (RSC 291) | 170.00 |
| RT Exam Review Course (***Student's Responsibility***) | 455.00 |
| Respiratory Therapy Exam (certification exams RSC 291) | 360.00 |
| Graduation Fees (Estimate) | 75.00 |
| **Total Summer Semester:** | $5,017.00 |
| | |
| **Total Estimated Program Costs:** | $15,836.00 |

*Table 0-6 Estimated Program Costs for Academic Year*

***ALL** costs are estimated and intended only to give a general idea. Amounts are subject to change during the time allotted for the degree. You pay only for credit hours taken during each semester.

**Tuition & Fees listed above are for 2026-2027 and are paid directly to the home campus, subject to change each year.** Specific fee rates may vary by campus. **All other costs (books, immunizations, screenings, supplies, etc.) are only approximation.** Program costs above do not include ordinary costs of daily transportation, living expenses, childcare, and health insurance. Transportation costs to travel to home campus, clinical lab and/or clinical sites are not included in the estimated expenses above.

## Professional Academic Standards

The MHPC faculty are responsible for preparing graduates at a level of competence consistent with professional and accreditation standards. Respiratory Care Practitioners make an important contribution to healthcare, and they must have professional skill sets, as well as the ability to apply theory to practice and to solve problems that affect occupational performance. Students must demonstrate professional behavior and the ability to promote therapeutic relationships.

- ***Students are encouraged to seek help from their instructors and their faculty advisors when academic problems arise***.

- Students continue to have access to their home campus services such as the Learning Center and Counseling Services.

- Faculty members may involve home campus representatives to address violations of Program policies or to address concerns related to student behavior and academic performance.

- The Program Director may develop a learning contract in cases where a student is in violation of academic or professional standards.
    - A student is allowed ***two learning contracts in a 16-week*** period. Consequences related to breach of contract are specified in the individualized student learning contract to promote awareness and transparency.

Program faculty members are responsible for facilitating the students' clinical performance, as well as academic and professional development. Faculty members are responsible for being aware of student conduct and discussing with the student any inappropriate professional behavior. Faculty can offer academic assistance or recommend remedial strategies. This assistance may be offered when students exhibit unsatisfactory academic progress, display behavior that does not meet professional standards, or commit violations to the Code of Ethics.

Students are expected to read the course materials and complete the course work on time. Unprofessional behavior or poor academic performance in either general education or professional coursework can result in dismissal from the professional program. ***Academic performance standards require students to maintain a minimum overall 2.0 GPA or greater and individual course grades may not fall below a 'C' to progress through the Program.***

- Because the program is sequential, students will not be allowed to progress to the next semester without successfully completing the preceding semester requirements and will subsequently be dismissed from the program if unable to maintain minimum standards of performance.

- Students must achieve a cumulative GPA of 2.0 or greater for professional coursework to graduate from the program.

- Students must successfully complete all clinical requirements within a timely manner.

All MHPC RCP students are subject to the rules of student conduct and academic regulations as published in their home campus college student handbook. Academic dishonesty and dismissal will be addressed according to both MHPC RCP Program policies and home campus policies and procedures.

## Technical Skills, Performance and Critical Demands

Respiratory Care Practitioners work with people who have a variety of disabilities. An RCP must have a deep commitment to serve the needs of disabled people of all ages, whether those disabilities are of mind or body, developmental in nature, or are acquired. Every effort will be made to meet the needs of respiratory care students with disabilities, within the parameters of the academic educational program and clinical availability in accordance with federal law.

The Respiratory Care curriculum within the Missouri Health Professions Consortium educates students as practitioners, in keeping with the requirements of the National Board of Respiratory Care (NBRC). Thus, students are prepared for entry-level employment in all areas of practice, and for the certification exam that is required prior to practicing as a graduate of an accredited Respiratory Care Practitioner Program.

**General Job Description:**

- Utilizes the application of scientific principles for the identification, prevention, remediation, research and rehabilitation of acute or chronic cardiopulmonary dysfunction thereby producing optimum health and function

- Reviews existing data, collects additional data, and recommends obtaining data to evaluate the respiratory status of patients, develop the respiratory care plan, and determine the appropriateness of the prescribed therapy

- Initiates, conducts, and modifies prescribed therapeutic and diagnostic procedures such as administering medical gases, humidification and aerosols, aerosol medications, airway clearance therapy and cardiopulmonary resuscitation

- Provides support services to mechanically ventilated patients, maintaining artificial and natural airways

- Performs pulmonary function testing, hemodynamic monitoring, and other physiologic monitoring.

- Collects specimens of blood and other materials

- Documents necessary information in the patient's medical record and on other forms, communicating that information to members of the health care team

- Obtains, assembles, calibrates, and checks necessary equipment

- Uses problem solving to identify and correct malfunctions of respiratory care equipment.

- Demonstrates appropriate interpersonal skills to work productively with patients, families, staff and co-workers
- Functions safely, effectively, and calmly under stressful situations
- Maintains composure while managing multiple tasks simultaneously
- Prioritizes multiple tasks
- Accepts directives, maintains confidentiality, does not discriminate, and upholds the ethical standards of the profession

**General Job Requirements:**

- Participate in lab activities that require hands on contact with mannequin and close working quarters with peers.
- Speak and understand the English language at a level consistent with competent professional practice.
- Observe and interpret signs and symptoms through visual, auditory, and tactile feedback. (Students must possess functional use of the senses that permit such observation.)
- Utilize hand and mechanical tools safely and effectively.
- Exhibit sufficient postural and neuromuscular control, sensory function, and coordination to safely and accurately provide remediation.
- Demonstrate the use of accepted techniques accurately and safely when using equipment and materials of the profession.
- Participate in physical activity involving lifting of approximately 50 lbs., bending, moving and safely supporting others in transfer.
- Communicate effectively and sensitively with patients and colleagues, including individuals from different cultural and social backgrounds.
- Communicate judgments and treatment information effectively, with appropriate confidentiality.
- Demonstrate appropriate behaviors and skills in classroom and fieldwork interactions with faculty, other students, fieldwork coordinator, fieldwork supervisors and professional colleagues.
- Demonstrate the mental capacity to assimilate, analyze, synthesize, integrate concepts and problem solve to perform therapeutic intervention

# MHPC Respiratory Care Clinical Skills Performance Tracking Checklist

- ***This form will be signed / completed by MHPC faculty once proficiency has been demonstrated within the lab course***.
- ***This form will be utilized as a communication tool during your clinical rotations to show skill proficiency to the preceptor.***

| Clinical Skill | MHPC Faculty Signature and Date |
|---|---|
| Hand Hygiene | |
| Isolation Procedures | |
| Vital signs | |
| Resuscitation (BLS Lab) | |
| Oxygen Systems and Transport | |
| Oxygen Administration | |
| Physical Assessment | |
| Humidity and Aerosol Delivery | |
| Small Volume Nebulizer Administration | |
| Meter Dose Inhaler & Dry Powder Inhaler Medication Administration | |
| Airway Clearance Therapy | |
| Lung Expansion Therapy | |
| Incentive Spirometry – Lab Only | |
| Pharyngeal Airway & Manual Ventilation | |
| Nasotracheal Suctioning | |
| ETT Suctioning (Inline/Close & Open) | |
| ETT Intubation Assist | |
| Airway Care / Oral Care | |
| Extubation | |
| Tracheostomy Care | |
| Tracheostomy Tube Change | |
| Arterial Blood Gas Puncture | |
| Chest x-ray interpretation | |
| High-Flow Therapy (HFT) | |
| CPAP/NIV initiation | |
| CPAP/NIV System Check | |
| Initiating Mechanical Ventilation | |
| Ventilator/Patient System Check | |
| Ventilator Liberation (Weaning) | |
| Bedside Bronchoscopy | |

*Table 0-7 Performance Tracking Checklist*

# Methods Of Instruction

**Course Workload:**

The RCP Program uses a variety of teaching and learning methods, including readings, lecture-discussion, demonstrations, audiovisual media, study guides, written assignments, care plans, concept maps, small group work, presentations, recorded lectures, case studies, computer-assisted programs, simulations, laboratory skills practice, and patient care in clinical settings. MHPC RCP utilizes a team-teaching approach for all courses in the Program and faculty may teach across the curriculum and at laboratory sites.

The RCP Program includes professional-level coursework in the classroom, laboratory practice, and clinical experiences. The laboratory experience component is a 5:1 clock hour to credit hour ratio, e.g. one credit hour earned requires five (5) clock hours of laboratory per week. The clinical experience component is a 10:1 clock hour to credit hour ratio, e.g. one credit hour earned requires ten (10) clock hours of clinical per week.

In addition to the class and clinical hours published in the "Semester Schedule of Classes," RCP students can anticipate additional practice hours and individually arranged evaluation sessions in the Respiratory Care laboratory. During each semester, additional time will be required for clinical preparation.

All Respiratory Care classes and labs are held Monday-Friday during daytime hours using asynchronous and synchronous modalities via distance technology and Canvas. Clinical rotations mirror an 8 or 12-hour shift at the hospital or Clinic. Clinical is generally scheduled Monday-Fridays with the actual days varying from semester to semester and the student's individual schedule. ***The DCE reserves the right to schedule students on weekends, evenings/nights or outside of the normal college schedule if necessary.*** Students are not allowed to make requests for certain days and/or locations.

To achieve success in the RCP program, a student is expected to spend an additional average of 20-30 hours per week studying and preparing. Some examples include practicing skills in the lab, preparing for clinical assignments, studying for exams, preparing for class, developing written assignments and presentations (not an inclusive list).

**Technology Requirements:**

In the MHPC RCP Program, all didactic courses are taught online. This means that students will be required to attend virtual classes at a specified time using Zoom technology. Students will be required to utilize a personal laptop and need access to reliable high-speed internet to successfully complete coursework. The computer should have a camera and a microphone. ***No iPads or tablets will be permitted for computer-based exams***.

Students will need the following software or apps:

- Adobe Reader and Flash Plug in as well, these can be easily downloaded from the web.
- Microsoft Office can be easily downloaded using your school email address
- Scanning device or scanning app on their phone.

It is recommended that students use Chrome or Firefox to access Zoom and the learning management system, Canvas.

*Students in need of technology such as a laptop, camera, or Wi-Fi should contact the Program Director, as most partner colleges have support to provide students with resources.*

**Online Student Expectations via Web Conference:**

***The following are expectations when attending a class session via web conference:***

- All students will be logged into the web conference platform at least 5 minutes prior to the scheduled class time. The instructor will provide the link or instructions for logging or calling in.

- Students will be considered tardy if they are not logged into the class with a camera on at the start of the scheduled class time.

- Students must have either a laptop with a camera or a web-camera. Students will log into the class using a web camera or laptop camera to be considered 'present'. ***Using a cell phone for web conference classes is not permitted without prior approval by the instructor in extenuating circumstances***.

- Students should mute their audio upon entrance into the class, and a camera should be on to allow instructors and classmates to see one another. Muting will minimize the background noise or students talking over the instructor or each other. (You should not be in a dark room; the instructor and classmates should be able to see your face.)

- Students should be mindful that when using the web camera, everyone can see everyone else. Proper scrub attire as per the student handbook is expected.

- If a student needs to leave the class early or disable their camera, he/she should notify the instructor.

- Students may unmute their microphone to ask a question, type questions into the chat link or raise their hand at any time depending on instructor preference.

- Students should make every attempt to secure daycare arrangements for children, assure pets are fed/walked, and family knows that you are "in class."

- During class breaks, students do not need to log off and can step away from the computer but return ready at the time given.

- If you have internet connection problems, please reach out to the instructor.

- ***Classroom Behavior:*** Students are expected to treat staff and faculty with respect and dignity. Students should refrain from talking when the instructor begins class/lecture/instruction. If the student has questions, they should direct questions to the instructor. Students may be required to leave microphones open during distance education sessions to ensure that there are no side conversations during lectures.

## Transportation

Students are expected to provide their own transportation to and from each clinical site. The term "clinical site" shall include any facility which has been selected to provide practice and/or observation experiences. It is the student's responsibility to obtain transportation to and from all activities required by the Program to be successful.

The Missouri Health Professions Consortium and East Central College, its agents, employees, and servants disclaim any liability for all claims of personal injury and/or property damage which shall arise from, or be incident to, the carriage, transportation, and/or transference of any student to, and/or from, any clinical site.

***Students should check their insurance liability policy prior to the acceptance of compensation from passengers.***

## Employment

Due to the demands of the Respiratory Care Program, it is ***highly recommended*** that a student be employed no more than sixteen to twenty (16-20) hours per week.

- Students are **not allowed** to work a night shift prior to clinical experience. It is **strongly recommended** that a student refrain from working a night shift prior to classroom and lab experiences.

- Being late, absent, or leaving early from class, lab, or clinical due to employment is not acceptable and will be considered an absence.

- Students must not be compensated for clinical coursework while in an employee status role at a clinical affiliate site unless they are enrolled in an apprenticeship program. Participation in the "Earn While You Learn" program allows the student to receive credit for clinical coursework while also receiving compensation for clinical hours. Program participation is at the discretion of the faculty, and students may never be substituted for a licensed professional.

## Professional Development and Memberships

A student's involvement and membership in the American Association for Respiratory Care (AARC) provides professional accountability and an opportunity to utilize multiple member resources available on the AARC website AARC membership benefits include the following:

- Access to a resource center for students
- Monthly publication of the Respiratory Care Journal
- Continuing Education Units (CEUs) tracking
- Networking with RCPs and other students

AARC membership is mandatory and included in the student fees. Students will also become members of the Missouri Society for Respiratory Care (MSRC). Graduates of the MHPC RCP Program are expected to assume responsibility for continuing competence and to maintain a commitment to the professional organization.

# PROGRESSION AND RETENTION

# Course Testing and Examinations

- Routine examinations are administered utilizing adaptive testing and software, requiring online proctoring via Proctorio, a secure exam proctoring tool.

- A student who is experiencing internet or computer issues should go to the "home" campus to take an exam.

- Examinations begin at the established time and a student who is late may not join the exam once it begins.

- ***During testing, cameras MUST always be on – NO EXCEPTIONS***. Failure to do so will place a student at risk of receiving a "0" for the exam.

- All hats, hoods, and Bluetooth devices must be removed. At the faculty's discretion, a student may be required to remove other articles of clothing and/or accessories.

- Students may not have any type of electronic devices in their possession during testing such as cell phones, smart watches, laptops, or tablets.

- Students may not use an additional calculator during the examination. (A calculator is embedded within the computerized exam software.)

- To be excused from an exam, the student must notify the instructor ***before*** class time. If the instructor is unavailable, the RCP Program Administrative Assistant may instead be notified. The instructor may deny the student the opportunity to make up for the examination if these guidelines are not met.

- The missed exam must be rescheduled within 48 hours. Students who fail to make prompt arrangements are at risk of receiving a "0" for the examination.

- Upon the discretion of the instructor, only ***one (1) examination per course per semester is eligible for makeup***. Any subsequent examination missed will be given the grade of "0".

- A "pop quiz" may not be made up, as this negates the purpose of the quiz. The grade of the quiz missed will be recorded as "0". If a student arrives late for class and the quiz has already begun, the student will not be allowed to take the "pop quiz" and will receive a "0". In general, a pop quiz will not be greater than 10 points on any given lecture day.

- Faculty will provide feedback to students in a variety of methods. Grade Advisements are utilized during the semester to notify students regarding performance when achieving less than a score of 75%. Faculty will also utilize the Exemplary Performance form to recognize outstanding performance.

- Students are encouraged to see faculty during established office hours or make an appointment to review questions or concerns.

- A student will be encouraged to seek additional exam-taking strategies early in the semester if difficulty in testing is experienced.

## Exam Review

- Once all students have completed the exam, students may view the most recent exam and rationale by making an appointment with the faculty member to review the exam over zoom or in-person.

- Students may not write notes about the exam or have phones out when reviewing the exam.

- Should the student be in violation of the exam review guidelines, the student may be subject to disciplinary action and/or dismissal from the RCP Program.

## Grading Scale and Grade Requirements

The grading scale for the MHPC RCP Program theory (didactic), lab, and clinical courses is as follows:

A = 93-100 B = 84-92.99 C = 75-83.99 D = 70-74.99 F = 69.99 & Below

***Students must achieve a score of 75% (a "C") or better in all professional Respiratory Care theory, laboratory, and clinical courses to progress through the Program.*** If a student receives less than a "C" grade in any Respiratory Care course, the student will be dismissed from the Program. Students must maintain a 2.0 cumulative grade point average to remain in the Program and be eligible to graduate. An "unsatisfactory" rating on any skill competency (after two previous unsuccessful attempts) will result in a course failure, ***regardless*** of the overall clinical grade.

## Withdrawal or Course Failure

RCP Program students who are ***unsuccessful*** in a course are requested to schedule an appointment for an Exit Interview with the MHPC RCP Program Director or Director of Clinical Education***. Failure to complete this process within one (1) week of withdrawal may result in the inability to re-enroll in future Respiratory Care courses.*** Appointments to meet with the Program Director or Director of Clinical Education can be made by contacting the Program Assistant or the Program's Administrative Assistant.

Any student wanting to withdraw from the Respiratory Care Program must also schedule an appointment for an Exit Interview with the MHPC RCP Program Director or the Director of Clinical Education. ***Failure to complete this process within one (1) week of withdrawal may result in the inability to re-enroll in future Respiratory Care courses.*** Appointments to meet with the Program Director or Director of Clinical Education can be made by contacting the Program Assistant or the Program's Administrative Assistant.

# Professional Conduct & Student Civility

The MHPC Respiratory Care Program is a professional program that expects the highest standards of ethical and professional conduct. The MHPC RCP Code of Professional Conduct is based on the American Association of Respiratory Care (AARC) Statement of Ethics and Professional Conduct. The RCP Program believes that professional behavior is an integral part of each student's educational endeavors.

Students are expected to maintain the following standards of conduct:

- Demonstrate Accountability and Responsibility
- Demonstrate Professional Behavior, Respect and Civility
- Maintain Confidentiality
- Maintain Academic Honesty

Each student is expected to demonstrate professional behavior as reflected by the American Association of Respiratory Care (AARC) Statement of Ethics and Professional Conduct. Students will fulfill professional roles including advocate, direct care provider, and educator. Students will treat peers, faculty, members of the healthcare team, clients and families with respect and compassion. Each of these people comes from a different cultural background and holds different values. Students will respect these differences, providing professional, empathetic and holistic health care for all.

***The AARC Statement of Ethics and Professional Conduct is as follows: "***In the conduct of professional activities, the Respiratory Therapist shall be bound by the following ethical and professional principles. Respiratory Therapists, Respiratory Care Faculty, and Respiratory Care Students shall:

- Demonstrate behavior that reflects integrity, supports objectivity, and fosters trust in the profession and its professionals.
- Promote and practice evidence-based medicine.
- Seeking continuing education opportunities to improve and maintain their professional competence and document their participation accurately.
- Perform only those procedures or functions in which they are individually competent, and which are within their scope of accepted and responsible practice.
- Respect and protect the legal and personal rights of patients, including the right to privacy, informed consent, and refusal of treatment.
- Divulge no protected information regarding any patient or family unless disclosure is required for the responsible performance of duty as authorized by the patient and/or family or required by law.
- Provide care without discrimination on any basis, with respect for the rights and dignity of all individuals.
- Promote disease prevention and wellness.
- Refuse to participate in illegal or unethical acts.
- Refuse to conceal, and will report, the illegal, unethical, fraudulent, or incompetent acts of others.
- Follow sound scientific procedures and ethical principles in research.
- Comply with state or federal laws which govern and relate to their practice.
- Avoid any form of conduct that is fraudulent or creates a conflict of interest and shall follow the principles of ethical business behavior.
- Promote health care delivery through improvement of access, efficacy, and cost of patient care.
- Encourage and promote appropriate stewardship of resources. ***** ***(*AARC.org** https://www.aarc.org/wp-content/uploads/2017/03/statement-of-ethics.pdf **Revised: 10/21)***

***The AARC Statement of Ethics and Professional Conduct also states Respiratory therapists shall,*** "Work to achieve and maintain respectful, functional, beneficial, relationships, and communication with all health

professionals. Disregard for the effects of one's actions on others, bullying, harassment, intimidation, manipulation, threats, or violence are always unacceptable behaviors. It is the position of the American Association for Respiratory Care that there is no place in a professional practice environment for lateral violence and bullying among respiratory therapists or between healthcare professionals."

**Incivility** is defined as, "rude or disruptive behavior that may result in psychological distress for the people involved and, if left unaddressed, may progress into threatening situations." (Clark, 2010) Examples of uncivil & unprofessional behavior are listed below. This list is ***NOT*** inclusive.

- Failing to meet set deadlines (application, vaccinations, etc.)
- Failing to notify faculty/staff of tardiness or inability to attend a scheduled appointment
- Discounting or ignoring solicited input from faculty regarding classroom, clinical performance, or professional conduct
- Knowingly withholding information from faculty, peers, & clinical staff
- Not responding to email, letters, or voicemail that require a reply
- Sending emails or text messages that are inflammatory/disrespectful in nature
- Demeaning, belittling or harassing others
- Rumoring, gossiping, or damaging the reputation of a classmate, instructor, or clinical staff member
- Speaking with a condescending attitude
- Yelling or screaming at faculty, peers, clinical staff, or clients & their families
- Display of temper or rudeness that may or may not escalate into threatened or actual violence
- Threatening others (This refers to physical threats, verbal/nonverbal threats, and implied threats.)
- Inappropriate posting on social media related to the MHPC RCP Program experience (Refer to the policy regarding Use of social media.)
- Illegally removing college property, healthcare agency, or client property from the premises
- Destruction of any college, healthcare or client property
- Falsifying or fabricating clinical experiences or location.
- Documenting respiratory care that was not performed or falsifying a client record
- Knowingly accessing a client's health record that is not in your direct care
- Failure to follow RCP Program and/or clinical site policies

## MHPC Partner Colleges' Student Code of Conduct

Below are the links to the student code of conduct at the MHPC partner colleges.

East Central College
- 3.20 Student Conduct

Moberly Area Community College
- Student Code of Conduct, page 17

North Central Missouri College
- Student Conduct, page 49

State Fair Community College
- Student Code of Conduct, page 63

Three Rivers College
- SP 2610 Student Code of Conduct

# Academic Honesty and Honor Code

Students are expected to conduct themselves honestly in all academic endeavors. Any act of academic dishonesty is a violation of the Academic Honor Code. The faculty believes that if students do not respect the ethics of their program, it is unlikely they will respect or practice ethical behavior in their professional careers. Falsifying academic work is a serious offense in this professional program. Such practice undermines critical thinking and ultimately endangers the student's future in a professional career. Academic Dishonesty includes but is not limited to the following:

- Claiming authorship/participation in a group paper or presentation without real contribution
- Delaying taking an examination or turning in a paper using a false excuse
- Discussing material covered in a test with students who have yet to take the test in question
- Previewing exams from a "test file" when the instructor does not permit students to keep copies of exams (This includes reviewing assignment submissions from program graduates.)
- Working in a group on a homework assignment that was assigned as individual work
- Memorizing, copying or electronically saving a block of questions on an exam, so that they could be included in a test file for later use by others
- Permitting another student to look at your answer sheet during an exam or taking online examinations in collaboration with another student when instructed to do so individually
- Submitting plagiarism: Plagiarism is the borrowing of ideas, opinions, examples, words, phrases, sentences, or paragraphs from a written source or another person, including students or teachers, without acknowledgment (i.e. an indication of the author, title and date of the source as described by the Publication Manual of the American Psychological Association). A student's failure to provide complete documentation regarding all resources is also considered plagiarism. Any work or assignment which is taken, part or whole from another person's writing or work without proper acknowledgment is dishonest. Students who allow another student to copy or use their work are also guilty of cheating.

***Any student who commits an act of academic dishonesty is subject to disciplinary action. The procedures for disciplinary action will be in accordance with the rules and regulations of the "home" campus governing disciplinary action and may include dismissal from the Program. Issues of academic dishonesty relate to behaviors/performance in both general education and professional courses.***

Students who violate the Academic Honor Code will be confronted by the faculty member and referred to the Chief Student Affairs Officer (CSAO) at the student's "home" MHPC institution. Supporting documentation, when appropriate, will be forwarded to the CSAO. Below are the links to the academic honor codes and disciplinary procedures at the MHPC partner colleges.

East Central College
- Academic Honor Code, pages 4-6

Moberly Area Community College
- Academic Honor Code, page 18

North Central Missouri College
- Academic Dishonesty, page 33

State Fair Community College
- Academic Honor Code, page 63

Three Rivers College
- SR 2610 Student Code of Conduct

## Use of Artificial Intelligence (AI) for Classroom Work

AI-generated work (text, code, images, videos, etc.) without proper citation is not accepted in the RCP Program as "the student's own work." The use of such materials without proper attribution is a violation of the MHPC RCP Academic Honor Code policy. During this course, usage of AI content/generation tools (such as ChatGPT) can only be used under specific circumstances. Any content generated by one of these tools is not accepted as "the student's own work". Unless approval has been given by the Program Director, along with citation of AI-generated content, AI use will be considered and treated as plagiarism.

## Code of Conduct Non-Compliance

According to legal standards, Respiratory Care Practitioner Students are expected to demonstrate professional behavior as reflected by the American Association of Respiratory Care (AARC) Statement of Ethics and Professional Conduct. A student whose behavior does not comply with the AARC Statement of Ethics and Professional Conduct presented here will receive sanctions which ***may include but are not limited to the following and do not have to be followed sequentially***:

- **Verbal Reprimand** – Official verbal warning that continuation or repetition of wrongful conduct may result in further disciplinary action. This will be documented in the student's file.

- **Letter of Understanding and/or Plans for Success** – Official written warning that continuation or repetition of wrongful conduct may result in further disciplinary action.

- **Probation** – Discipline that may be imposed for any misconduct (failure to follow the Code of Professional Conduct, violation of the Civility Policy, etc.) that does not warrant dismissal from the Program but requires further consequences. The probationary status includes the probability of further penalties if the student commits additional acts of misconduct or fails to comply with any probationary contract details. (See Probation Policy for details.)

- **Program Dismissal** – Permanent termination of admission and enrollment status in the MHPC RCP Program.

Students should read and fully understand the MHPC RCP Code of Professional Conduct in this handbook. A student may be dismissed on the first occurrence of incivility based on the severity of the offense. **Incivility offenses will follow the student through the Program.**

The decision to place a student on **probation** is reviewed by all Program faculty, and probation status will be reviewed as needed. **Any student placed on probation shall receive one (1) letter grade lower than that received in the course. (For example, if a student has a letter grade of "C" in the course, probation status would result in a letter grade of "D" being issued.) Any student dismissed from the Program for a Code of Conduct violation shall receive a failing grade in that course.**

***Students should also read and understand the "home" college Student Code of Conduct and the RCP Program's Academic Dishonesty policy. Links to each "home" college Code of Conduct are listed in this handbook.***

# Disciplinary Action/Probation

According to legal standards, Respiratory Care Student Practitioners are expected to demonstrate professional behavior as reflected by the American Association of Respiratory Care (AARC) Statement of Ethics and Professional Conduct. Students whose behavior does not comply with the AARC Statement of Ethics and Professional Conduct presented here will receive sanctions which ***may include but are not limited to the following and do not have to be followed sequentially***:

- **Verbal Reprimand** – Official verbal warning that continuation or repetition of wrongful conduct may result in further disciplinary action. This will be documented in the student's file.
- **Letter of Understanding and/or Plans for Success** – Official written warning that continuation or repetition of wrongful conduct may result in further disciplinary action.
- **Probation** – Discipline that may be imposed for any misconduct (failure to follow the Code of Professional Conduct, violation of the Civility Policy, etc.) that does not warrant dismissal from the Program but requires further consequences. The probationary status includes the probability of further penalties if the student commits additional acts of misconduct or fails to comply with any probationary contract details. (See Probation Policy for details.)
- **Program Dismissal** – Permanent termination of admission and enrollment status in the MHPC RCP Program.

Students should read and fully understand the MHPC RCP Student Code of Conduct and Student Civility Policy in this handbook. A student may be dismissed on the first occurrence of incivility based on the severity of the offense. **Incivility offenses will follow the student through the Program.**

The decision to place a student on **probation** is reviewed by all Program faculty, and probation status will be reviewed as needed. When placed on probation, the student and instructor will discuss the offence, and a written report will be prepared by the instructor. The student will be asked to sign this report, indicating that they have seen the report, not necessarily that they agree. This report will include:

- A factual account of the incident
- A plan to learn from and correct the issue(s)
- Actions necessary for success while on probation
- Length of probation

**Any student placed on probation shall receive one (1) letter grade lower than that received in the course. (For example, if a student has a letter grade of "C" in the course, probation status would result in a letter grade of "D" being issued.)**

# Program Dismissal

***A student may be dismissed from the professional year of the RCP Program including, but not limited to the following reasons:***

- Failure to maintain academic standards as outlined in the Academic Standards Policy
- Failure to meet technical skills and competencies or required performance evaluations
- Failure to uphold the Code of Conduct by displaying any behavior which shows poor judgment, academic dishonesty, endangerment or discredit of individuals, the profession, or the department
- Failure to meet attendance policies

If a student withdraws or is dismissed from the RCP Program, the Program Director and RCP Program faculty will determine if the student is eligible to re-apply later. Contingencies may be established for re-application at the time of dismissal or withdrawal. ***Grievances, complaints, and appeals will be honored in compliance with "home" campus policies and procedures.***

# Readmission Policy/Procedure

**Eligibility for Readmission:**

- Readmission must occur ***within two (2) years*** from the beginning of the semester, not completed or the entire RCP Program must be repeated.
- ***Application for readmission can be made only twice.***
- Readmission can only occur once per student and is effective at the beginning of the first RCP Program class for which the student is registered.
- A student who withdraws or who has not been successful in the first semester of the RCP Program is required to reapply and meet the same requirements as listed in the Admission Criteria. The student will be considered for admission with all other eligible applicants.
- ***Violations of the RSC Student Code of Conduct may deem a student ineligible for readmission***.
- Students who have failed two Respiratory Care courses at another institution are not eligible for RCP Program admission.

**Requirements for Readmission:**

- The student must demonstrate that the condition(s) causing failure, dismissal, or withdrawal have been corrected so that the student is able to complete the RCP Program. If the student left the program on ***'probation'*** status, the student, if readmitted, will remain on ***'probation'*** status.
- In case of academic failure, students will be required to complete an individualized remediation plan which may include but is not limited to course audit, tutoring, math, practice quizzes/exams, final exams, and lab skills.
- It is at the Admission and Retention Committee's discretion to include appropriate stipulations for readmission.
- Readmission is dependent upon availability of positions in the class.
- Students must meet all current admission criteria.
- Students who were enrolled in another Respiratory Care Program, prior to admission in the MHPC RCP Program, are not eligible for readmission to the MHPC RCP Program should they be unsuccessful or choose to withdraw.

**Process for Readmission:**

- Submit a letter to the Chairperson (Program Director) of the RCP Admission and Retention Committee requesting readmission for a specific year or semester.
- The letter must include the reason(s) for failure, dismissal, or withdrawal, and how or why the situation has been remedied.
- The Chairperson of the Committee will request any additional documentation requested by the Committee and/or request a follow-up letter that may be time sensitive.
- Upon receipt of the documentation, the Committee will either request further documentation or schedule a meeting with the student to discuss readmission.
- Following the meeting, the student will be ***notified in writing*** of the Committee's decision, and the Committee's decision is final.

**Readmission decisions are made in October for Spring and Summer Semester requests. Letters of intent must be on file by September 1st for the October Readmission Meeting.**

Students that are eligible for readmission and have a cumulative GPA of 2.5, may request permission to audit a Respiratory Care course. Clinical courses cannot be audited. Students are expected to fully participate in the course and are subject to all Respiratory Care student policies.

# Academic Grievances and Appeals

All grievances related to academic issues such as grades or grading appeals, complaints about instructors or instructional staff, academic policy and procedures, attendance, disciplinary matters related to classroom behavior and/or other issues involving credit classes should be resolved using the RCP Program Grievance Procedure. In the event of a grievance, the student should first attempt to resolve the issue informally with the RCP Program faculty or staff. If the issue cannot be resolved informally and/or the student wishes to formally appeal a decision, the student must present a written statement regarding the grievance to the RCP Program Director within 5 working days after the decision was rendered by the faculty member/staff. After consultation with the faculty/staff, the "home" campus representative, and the student, the RCP Program Director must then make a decision regarding the grievance. A written response from the RCP Program Director will be given to the student and copied to the faculty or staff member, within 10 working days from the date the Program Director was originally contacted by the student. If the student is not satisfied with the RCP Program Director's decision, the student should inform the Program Director that he/she would like to further involve representatives from the "home" campus. The Program Director will then contact a representative from the student's "home" campus (generally the Dean of Academic Affairs) in accordance with the "home" campus policies regarding grievance, grade appeal, and/or complaints. Below are the links to the grievance/appeals policies at the MHPC partner colleges.

East Central College

- Student Grievance and Appeals Board Policy 3.11

Moberly Area Community College

- Student Grievance Policy,

North Central Missouri College

- Student Complaint Policy
- Student Grievance and Grade Appeal Policy

State Fair Community College

- Grievance Process,

Three Rivers College

- SP 2130 Student Grievance
  SP 2140 Student Appeals

# CLASSROOM, LABORATORY, AND CLINICAL

## Emergency Information Record

Upon admission into the MHPC RCP Program, each student will be asked to complete an official Emergency Information Record. This record will include the student's name, address, phone number, and the phone number for the person(s) to be contacted in case of emergency. The purpose of this information is to provide a plan for the emergency care of the student. Students will be asked to update the record at the beginning of each semester. If any of this information changes throughout the semester, the student should provide the MHPC RCP Program Office with the new information as soon as possible. Students are responsible for keeping the record current so that the Emergency Information plan will be effective.

## Cell Phones/Electronic Devices

Cell phones must be in silent mode when in the classroom or lab. The ringing of a cell phone is considered a disruption, and the student with the phone may be asked to leave. Any material covered, plus missed quizzes or exams, cannot be made up, and the time spent outside the classroom is considered an unexcused absence. Voice mail and text messages may be retrieved only during breaks.

The cell phone must remain silent mode and out of sight of clients and their families. If a disruption occurs due to a cell phone or electronic communication device, the student will be dismissed from the clinical experience, resulting in an unexcused absence. (See "Policies for Clinical Experience" in the Respiratory Care Student Handbook.)

## Faculty Communication

Open communication is highly encouraged between students and faculty members. The following guidelines will allow for respectful contact between both students and faculty.

- The instructor's e-mail will be provided to students at the beginning of the semester and should be the primary means of communication for routine matters, concerns, and questions. Emails sent after 3:00 p.m. may not get a response until the next academic day. There will also be no response to emails during the weekend or college recognized holidays.
- The GroupMe app will also be a method of communication.
- If face-to-face communication is needed, students are encouraged to schedule an appointment during the faculty's regular office hours (posted beside the faculty's office doors & on the Canvas course page).
- ***In the event of a clinical absence, students must notify the Director of Clinical Education and the clinical site contact 2 hours before the clinical start time.***
- **It must also be placed in Trajecsys and logged as an absence.**

# Classroom Attendance Policies

## CLASSROOM ATTENDANCE

Due to the complex nature of class content, students enrolled in the MHPC RCP Program are expected to attend all scheduled class sessions, labs, and clinical experiences.

- Classes begin ***promptly*** as specified by the instructor. It is the student's responsibility to show consideration for the class by being prompt. The instructor may use his/her discretion regarding whether to allow a student to enter the classroom late due to the disruptive nature.
- All cell phones and other communication devices must not cause disruption during class sessions.
- **Students may not audio or video tape any classroom, clinical, or lab activity unless prior written consent has been granted by the instructor**.
- The individual student will be responsible for content that is missed during an absence.
- A faculty member may use attendance, or lack of attendance, as a criterion in the determination of a course grade and/or dismissal from a course.
- Students aware of an anticipated absence should inform the course instructor and administrative assistant by e-mail at least 24 hours in advance. In the event of an unexpected absence, it is the student's responsibility to notify the course instructor and administrative assistant by e-mail ***prior*** to his/her absence when possible.
- Failure to contact the appropriate people is considered "no call, no show" and may be grounds for dismissal from the professional year of the Program.
- Any missed class, lab or clinical time without prior notification or prior approval, ***may result in dismissal from the Program.***
- The instructor on record can then decide with this information on how the absences can be rectified or whether it is possible to satisfactorily complete the course with the number of identified absences.
- Class time is very important. Ten (10) points will be deducted for late arrival for quizzes, midterm, and final exams at the instructor's discretion.

**To facilitate the best performance from each student, instructors will:**

- Require that all students communicate via Group Me Application or email with the instructor if running late. (This will count as a tardy.)

- Mark any student absent if he/she is running late and does not contact the instructor.

- Request a doctor's note or a note from hospital staff for any student sickness, child sickness, or immediate family sickness, including immediate medical assistance, that results in missed class, lab, or clinical time.

- Require funeral home documentation for any death in immediate and/or extended family.

- Require physical/photographic proof for any reason causing missed class, lab or clinical time. (Example: Flat Tire –receipt for tire; Car Accident – Police report number or photo of vehicle; Stuck in Traffic – Photo of traffic jam; Traffic Ticket, Hospital bracelet, or Court Date – Subpoena or copy of ticket, etc.). ***Any absence that does not have physical or photographic proof will be an unexcused absence.***

**Excused absences (those that will not count against the student) include:**

- Medical emergency/hospitalization of the student
- Military duty
- Funeral leave for an immediate family member
- Jury Duty

## CLASSROOM ABSENCE

***Students will be required to present official documentation to the RCP Program Director/Clinical Director as soon as possible for absence to be excused.*** A student exhibiting habitual tardiness or absence (i.e. more than one occurrence) is considered unprofessional and disruptive to the instructor and other students. The course instructor will note the issue on the student's Academic Advising Form and a Learning Contract, or a Breach of Professionalism may be issued. Habitual tardiness or absenteeism is grounds for dismissal from the professional year of the Program.

If two consecutive weeks of class are missed during the regular 16-week semester, the student will be dropped from that class unless acceptable justification is supplied to the Instructor, Program Director, and Dean of the "home" community college. Additionally, a student who misses more than one-fourth of the class during any scheduled session may be dropped from that class by the instructor if, in the opinion of the instructor, the student does not have a reasonable opportunity to succeed in the class.

***Regarding lectures*** for a 16-week course, a student who is absent more than twice the number of times that course meets during a week for lecture will incur a 5% deduction in the overall grade for each absence after the allowed amount. (Example, for a course that meets twice per week, the student is allowed to miss class four times before a deduction will occur.) For an 8-week course, the student is allowed to miss lecture the number of times the course meets during a week for lecture. Every absence after that will lead to a 5% deduction in the overall grade for the course. (Example, for a course that meets twice per week, the student is allowed to miss class two times before a deduction occurs.)

## INCLEMENT WEATHER

The policy of the MHPC is to conduct scheduled classes, keep offices open, and carry out normal college operations under conditions deemed to be reasonably safe. Sometimes adverse weather conditions or other events force the temporary closing or postponement of classes. Students should ensure that current contact information is always on file with the RCP Program Office. In the event the RCP Program activities are being held, students should not attempt to travel under unsafe conditions or to take unnecessary risk due to inclement weather if they must travel some distance to get to campus. The department administrator and/or course director should be notified if the student is unable to attend class or other activity due to weather. If classes are canceled, a make-up assignment will be posted for the day(s) the college is closed due to inclement weather. It is the responsibility of the student to sign on to Canvas to receive the assignment and/or instructions for each day's classes and to also review the due date.

# Skills Laboratory Attendance and Policies

## SKILLS PRACTICE

The main purpose of the laboratory is for clinical simulations, lab classes, practicing and testing for client care skills, and remediation. Labs are located at the ECC Union and CMU Columbia Forum campuses. Instructors are available to guide students to become proficient with clinical skills during designated times. Students are highly encouraged to ask questions/get clarification to assure that skills testing is successful on the first attempt. An appointment must be made in advance with individual instructor(s) when additional instruction/assistance is needed.

Practice skills in the lab are mandatory prior to testing and will be done on the student's own time. Practice time and remediation should be tracked by signing in and out of the designated Lab Logbook. ***The secret for passing the skill proficiency tests is practice!*** The entire procedure should be practiced several times from "reading the orders" at the beginning of the procedure to "documentation" at the end. It is the student's responsibility to initiate the use of the lab for his/her independent practice.

Out of respect for fellow classmates, students are expected to conduct themselves in a quiet, orderly manner, with no interruption to an instructor during scheduled practices or checkouts. All books and equipment should be used with care and returned to their place. Any malfunction of equipment should be reported to the instructor. Violation of these guidelines may result in the parties involved being asked to leave and the time missed considered an unexcused absence. Students are expected to accept responsibility for cleaning up after themselves.

***There are no excused absences from the skills lab experience.*** If absence occurs, it is the student's responsibility to plan for making up the missed skills lab experience. For Skills Proficiency Testing, the skills are listed in Trajecsys. It is required that peer reviews be completed by fellow students prior to testing. The proficiency checklist should be signed and dated by the peer reviewer. Students are also expected to have all questions answered regarding the checklist components ***PRIOR*** to testing.

## CRITICAL SAFETY AND PROFESSIONAL BEHAVIOR

Client safety is a critical part of client care. Critical behaviors are elements of client safety that must always be followed. ***If critical behavior is not performed, it will result in an automatic failure***. Critical behaviors are evaluated during each skill proficiency exam.

***The following critical behaviors WILL constitute an automatic failure:***

- Violation of patient safety at any time before, during, or after the scenario.
- Failure to use appropriate hand hygiene (sanitizer, soap and water) at any time during scenario.
- Failure to use two identifiers to verify your patient (i.e. name, DOB, MRN, etc.) and compare to I.D. band and/or medical record upon entering room.
- Failure to address allergies with patient upon entering room.
- Failure to put bed in low position when not at the bedside.
- Failure to use side rails appropriately.
- Failure to complete checkout in allotted time frame.
- Absent to checkout.

***The following critical behaviors MAY constitute an automatic failure:***

- Failure to maintain sterility when applicable
- Failure to provide privacy for the patient
- Failure to use gloves appropriately
- Failure to maintain a "clean" patient environment
- Failure to obtain vital signs accurately
- Failure to be in clinical uniform
- Failure to have all necessary equipment
- Failure to obtain peer review signatures.
- Tardiness to check out.

***Hand Hygiene:*** Handwashing must be done with actual soap and water or hand sanitizer when entering or leaving the patient's bedside, at the beginning and end of each procedure, and as indicated during a procedure.

***Laboratory Dress Code:*** During skills proficiency testing and simulations, students must be in full uniform, with closed-toed shoes. ***Students in violation will be asked to leave the lab and return when dressed in full Clinical attire.*** Scrubs with a name badge is required when in the lab. The badge must be worn at eye level to clients. Faculty have the right to refuse lab access if a student is not dressed properly for testing and/or lab practice.

***Student Expectations – Items a student SHOULD do:***

- Wear a mask in the lab, when required, and/or deemed appropriate.
- Wash hands before touching the simulator manikins.
- Display professional, courteous conduct and communication always.

- Treat the manikin and its belongings with the same respect you would a live patient.

- Keep the manikin dry, using care when the simulation involves fluid (i.e. blood, urine, etc.). In addition, do not spill fluids over any component inside the torso of the simulator manikin since this could damage the unit and might present a possible hazard for the operator.

- Ensure the flow of air/suction to all equipment, control boxes, etc. are turned off completely when finished with a manikin.

- Use all equipment with care and report any damage/malfunction of manikins or other clinical lab equipment immediately to a faculty member or department administrative assistant.

- Report ***any LATEX ALLERGY,*** or other allergens that a student may be exposed to in the clinical lab setting, to a faculty member prior to entering the clinical lab.

- Place ***ONLY*** "sharp" items such as needles/syringes/glass in the sharps' containers. NO PAPER or ALCOHOL wipes.

- Report immediately to the instructor if a splash or needle stick occurs so that an incident report can be completed.

- Dispose of any trash in appropriate containers.

- Return lab supplies to the appropriate storage areas when completed.

- Sanitize your workspace including the manikins, bed frames, tables, and simulation pads after each use.

- Support the manikin head when moving or turning the simulator.

- Use cell phones, smart watches and other electronic devices in ***silent mode only or turn them completely off*** during lab experiences. (Students may check messages on class breaks.)

***Student Expectations – Items a student SHOULD NOT do:***

- Practice any invasive procedures on anyone at any time.

- Interrupt an instructor when working with a student during practice or during an actual skills proficiency exam.

- Use point/felt tip pens near the manikins due to potential permanent discoloration of manikin "skin".

- Place photocopied papers on, under, or near the manikins to prevent the risk of ink transfer.

- Place iodine or other staining medications into contact with the manikins.

- Place artificial blood or other materials on the manikin's skin without first verifying with the faculty/lab staff that the materials will not damage the manikins.

- Lift the manikin by the arms. (Always use a lift sheet to move or turn the simulator manikin.)

- Manipulate, or remove any cords or connections from any of the equipment or the simulator manikin unless instructed to do so by the instructor (i.e. IV lines, etc.).

- Introduce any fluids except airway lubricant in small amounts into the manikin's esophagus or trachea. (Airway lubricants are provided in canisters specifically labeled for airway use.)

- Use anything other than the supplied, labeled lubrication spray/liquid to lubricate equipment.

- Inject anything other than sterile water into the simulator. (All prepared medications are in sterile water.)

- Remove any supplies or equipment from the clinical lab.

- Take photographs, audio, or video recordings while in the lab unless it is approved for learning purposes. (Students and other users are required to complete a photo and video release statement if their simulation experience requires recording by faculty/lab staff).

***Violation of these guidelines will result in the involved parties being asked to leave and the time missed will be considered as an unexcused absence.*** The RCP faculty and lab staff desire to see students become proficient and safe with client care and succeed in their procedure/skill tests. If a student is unsure how to perform a skill, the student should ask an instructor for help. To ensure availability of a specific faculty member, the student should consider scheduling an appointment. ***Changes made to the above guidelines may be made at the discretion of the Faculty/Lab staff.***

## LABORATORY REMEDIATION

The RCP Program faculty are available to assist students. Supplemental instruction is available to students at their request. Times for didactic or laboratory remediation must be mutually agreed on by the teacher and student. The student is expected to come to a session prepared to ask and answer questions, plus demonstrate and practice skills during the session. Sessions can be held in groups or individually.

Faculty members are available by phone and e-mail for specific needs. Please do not hesitate to ask for assistance with problems that arise with didactic, laboratory, or clinical requirements or schedules. If a student is unable to, with these means of extra assistance, meet the course outcomes, the faculty will counsel the students and may direct them to additional resources they need to succeed in the Program.

If a student is unsuccessful on the first attempt with skills proficiency, the following process will be followed:

- Schedule a re-test time with an available instructor.
- Practice for at least the minimal time identified by faculty on each needed skill in the Lab.
- After practice, have a peer reviewer observe skill performance and offer suggestions.
- Re-test at the scheduled time.

If a second or third attempt is required, the remediation steps above should be followed. Only three attempts are permitted for each skill. Failure to achieve this will result in an "F" for the clinical course and the student's inability to progress in the RCP Program.

# Clinical Education Overview

## CLINICAL EXPERIENCE

Clinical experiences are an integral part of the MHPC RCP curriculum. They provide students with opportunities for "hands on" application of the skills and knowledge taught in classes. Clinical experiences are designed to expose students to a variety of practice settings and client populations such as infant, pediatric, geriatric, adult, and mental health populations in a variety of care settings.

***Through the various clinical experiences, students improve their skills to progressively higher levels of performance and responsibility in the following areas:***

- Comfort level regarding understanding of the needs of the patient as an individual within his or her given context
- Observation skills needed for appropriate communication, intervention and documentation
- Communication skills and the application of therapies with patients and professionals from diverse backgrounds
- Ability to articulate the role of a Respiratory Care Practitioner in a variety of healthcare settings
- Application of learned respiratory therapy knowledge
- Understanding of the supervisor/supervisee relationship and the role/responsibility of the Respiratory Care Student
- Professional behaviors required to function effectively as a Respiratory Care Practitioner

The RCP Program laboratory and clinical courses are established to provide students with hands-on experience in a clinical setting (either at a clinical site, in the RCP clinical laboratory on campus, or virtually). Students meet in the assigned clinical or lab setting and are supervised by the faculty and/or preceptors. Students are required to conduct themselves in an appropriate and professional fashion while in the lab and clinical setting, following guidelines established by the Program faculty. Students should expect to spend a minimum of an additional eight (8) hours per week outside the clinical and lab to prepare for the experiences and to complete all the appropriate assignments.

## CLINICAL EDUCATION EVALUATION OVERVIEW

The responsibility of the Respiratory Therapist has grown in complexity with the development of more sophisticated procedures and equipment. It is essential that ECC and the clinical education sites work together to provide the best educational opportunities and experiences for all students. During their clinical experience, students should have the opportunity to perform all types of routine procedures. **Each student is responsible for his/her performance in this competency-based curriculum.**

Efforts have been made to develop a clinical evaluation system whereby students may progress through clinical education with their strengths and deficiencies identified. The clinical evaluation will help each student address the deficiencies to optimize their completion of the Program. Competency-based evaluation is a means of monitoring the progression rate of students during their education by determining whether they can meet specified objectives thus demonstrating proficiency. A student's knowledge and skills are

directly evaluated in the classroom and indirectly evaluated throughout their educational experience. The student's application of skills is evaluated in the assigned laboratory and during their clinical experience at each of the clinical education sites. To properly evaluate the student's application skills, it is essential to determine the level of performance ability. Only with a competency-based evaluation system can we objectively determine the proficiency level a student has achieved. It is very important that knowledge and skills be reinforced and evaluated in the clinical education setting to maximize the students' clinical effectiveness. It is the role of clinical education sites to provide clinical experiences designed to bridge the gap between theory and application. This can only be accomplished through quality supervision of clinical experiences in each medical facility. The clinical portion of the MHCP RCP Program is an integral part of the total curriculum. To be effective, all persons involved with the Program must thoroughly understand the structure and function of the clinical evaluation system for the total education experience of a student.

The competency-based evaluations for respiratory care students follow the guidelines as recommended by the National Board of Respiratory Care (NBRC). This Program also encourages additional expectations during classroom/lab studies. Students are required to complete lab competencies along with their didactic coursework. Lab competencies are utilized to ensure the student understands the interaction and skills required for patient care, respiratory therapy treatment modalities, mechanical ventilation, and specialized testing. Students are allowed ***three attempts*** per competency and are evaluated by faculty of the RCP Program. Only faculty members will submit final graded competencies. Upon successful completion, the student and faculty member will attest the evaluation, and it will become a permanent part of the student's file. If the competency is not successfully passed, ***the student will be required to remediate prior to the last attempt. If the student is unsuccessful upon the third attempt, the student must repeat the course in its entirety, which will affect his/her enrollment in the Program.***

All competencies completed within the lab are the skills students will be completing in the clinical setting. This process reinforces skills attained in the classroom to real life patients and scenarios.

Methods of Evaluation:

- Lab Competencies
  - RCP Competency Evaluation Form
- Clinical Education Checklists
  - Preceptor Clinical Evaluation Form
- Patient Case Study
- Final Evaluation

Each term the student is graded on a minimum number of clinical competencies performed. **The student must then perform a minimum of two (2) practices in the clinical setting prior to being evaluated**. In the clinical education setting, students who have observed, assisted, and have satisfactorily performed a particular competency may notify the clinical preceptor or Director of Clinical Education of their readiness to perform the unassisted examination but under direct supervision for a grade (competency exam). The evaluator must review the procedure with the student present and must appropriately complete the Competency Evaluation Form at the time the competency is being performed. The clinical preceptor or DCE can complete the Evaluation. The clinical preceptor or DCE intervenes with the evaluation only if patient safety is compromised. Successful completion and passing score of the skill demonstrates student competency.

A student who does not successfully complete or pass the skill will be required to continue supervised practice and will be allowed to do a second attempt. If the student fails a second time, they will be required to

remediate in the lab. All required mandatory competencies, as stated in the clinical checklist for each course, must be successfully completed. Students will not be required to perform any procedures that exceed their educational or clinical experience. A student may be asked to transport patients or to perform other tasks that are pertinent to respiratory care of patients or for the operation of the department and will do so willingly and without hesitation.

The Competency Evaluation Form is very important, and when used properly can give a measure of a student's ability to adequately perform each skill. The practice will allow for total evaluation of the student and will indicate any area of difficulty. Clinical Evaluation will be completed by the adjunct instructor or DCE on each student during their mid-term and final evaluation. The Clinical Evaluation identifies successful demonstration of essential areas of professional behavior and interpersonal skills. These include attendance, appearance, reliability, communication, ethical and professional behavior, and quality of work. The goal of the Clinical Evaluation is to reinforce and encourage appropriate student behavior as well as to document unsafe or inappropriate behavior. The instructor and/or DCE will review the results with the student. Students will complete a mid-term and final evaluation with the instructor or DCE. Evaluations will focus on the student's affective, psychomotor, and cognitive domains. Student evaluations are included in the course grade.

Students, preceptors, and site supervisor/directors will complete an End-of Term Evaluation at the end of each clinical education term. Students will evaluate the sites and preceptors, Supervisors, & Directors will evaluate the student. The results of all evaluations will be shared with both parties. The purpose of the evaluation is to demonstrate student/site strengths and weaknesses and provide feedback on ways to improve or add to the clinical education experience. The results will be shared with RCP Program faculty and the Program advisory committee as part of the systematic RCP Program evaluation. The practice of appropriate documentation offers an overview of the student's progress and ability at various stages of the student's progress in the RCP Program

## MALPRACTICE & PROFESSIONAL LIABILITY INSURANCE

Clinical sites require that students be covered under a professional liability insurance plan. Students are automatically placed under their "home" college's professional liability policy when participating in clinical at a facility which has a signed contract agreement. The liability policy also includes other clinical experiences as part of a course assignment, plus any approved function.

## SITE AFFILIATES AND CONTACTS

Each MHPC partner college has its own clinical affiliation(s).
BJC Health System
Blessings Health
Boone Health
Bothwell Regional Health Center
Golden Valley Memorial Healthcare Center
Hermann Area District Hospital
Hannibal Regional Hospital
Mosaic Life Center
Mercy Health Systems
Missouri Delta Medical Center
Missouri Baptist
Mosaic Life Center
MU Healthcare
Phelps Health
Poplar Bluff Regional Medical Center
SSM Health Systems

## SITE AVAILABILITY

There may be times when the MHPC RCP Program is unable to reach a mutually agreeable clinical contract with a specific site. Even after a student has been assigned to a site, the clinical experience may be canceled at any time due to unforeseen circumstances such as staff vacancies, medical leave, staff re-organization, as well as other reasons. When these cancellations occur, the RCP Program will do everything possible to secure an alternate placement, as soon as possible. The student should be prepared to be flexible and make last-minute changes related to travel, relocation, or scheduling.

The MHPC RCP Program will abide by the National Council for State Authorization Reciprocity Agreements (NC-SARA) in the placement of students out of state. Currently within the MHPC Consortium, East Central College, Moberly Area Community College, North Central Missouri College, State Fair Community College and Three Rivers Community College are members of NC-SARA. The individual institution determines whether the program meets the requirements for professional licensure in the state where the student resides based on NC-SARA compacts or applicable licensing boards.

## CLINICAL SUPERVISION AND AUTHORITY

The Director of Clinical Education is a full-time faculty member of the College who is responsible for the coordination of all clinical affiliates, plus the content, quality and evaluation of the clinical phase of the RCP Program. Any concern regarding the DCE should be presented to the Program Director or Dean of Health Sciences.

The Preceptor is an employee of the hospital who satisfies the job description of that position and who is responsible for coordinating and evaluating the daily performance of the student while in the clinical setting. Any concern regarding a preceptor should be presented to the Director of Clinical Education and will be handled by the management of the affiliate and the college.

All students will be under the supervision of the following personnel:

- The director, manager, supervisor, coordinator, and/ or charge therapist
- The preceptor or their designee
- The Director of Clinical Education
- Any director of a specialty area
- All physicians and hospital administrators

Except for the Director of Clinical Education, the extent of authority that any of the above-mentioned personnel can exert on the student is limited to counseling, suspension from the clinical affiliate, and coordination of the workload. If any of the personnel listed above feels that a student has committed a violation of these regulations or has committed an offense that should result in the student's suspension/ dismissal from the RCP Program, he or she may bring this matter to the Director of Clinical Education and the Program Director.

## CLINICAL ISSUES/PROBLEMS

The first step to be taken when a clinical issue arises is for the student to try to identify the problem and explore what events may have led to the difficulties. The next step is to look at possible solutions to the problem and analyze each one to determine the possible consequences. Based upon the analysis, a student should determine which of the possible actions will give the best result. A student should attempt to talk the problem over with the clinical site educator. If the student does not feel comfortable doing this, the next step is to contact the Director of Clinical Education. Students are encouraged to contact the Director of Clinical Education to discuss any problems, questions or concerns that arise during clinical experiences in relation to assignments and project issues.

# Clinical Expectations and Policies

## PROFESSIONALISM IN THE CLINICAL SETTING

Students are expected to always act in the highest professional manner during clinical rotations, remembering also that the clinical site could be the student's next site of employment. This professionalism includes, but is not limited to the following behaviors:

- Timeliness and attendance
- Positive communication with all staff and patients
- Adherence to MHPC RCP guidelines and facility dress codes
- Active involvement during patient interactions, observations, professional meetings, etc.
- Response to all requests in a positive manner
- Pursuit of learning opportunities, specifically if "down time" presents itself
- Absence of texts, e-mails, phone calls, or other personal communication while on-site
- Absolutely no smoking, vaping, or high fragrance. You're helping others breathe!
- Ethical behavior in all matters

## PATIENT CONFIDENTIALITY AND THE HIPAA SECURITY RULE

Health care professionals have a moral and ethical responsibility to protect the privacy of their clients/patients. This has been mandated by federal law in the Health Insurance Portability and Accountability Act (HIPAA). This encompasses all aspects of client care such as pulling curtains or using towels/sheets to protect the client's modesty and dignity, as well as refraining from discussing details about a client in any circumstances where you can be overheard. RCP students have an obligation to protect the client's information from being seen by anyone who has no need to know. Students should never leave an electronic record open when walking away from the computer or leave client charts unattended for anyone to view.

***Definitions regarding a patient's health records:***

- **Privacy** -- the clinical site's desire to limit the disclosure of the client's personal information

- **Confidentiality** -- a condition in which information is shared or released in a controlled manner

- **Security** -- measures to protect confidentiality, integrity and availability of information and the information systems used to access it

- **Electronic Health Record** (electronic medical records/information) -- a computerized format of healthcare information that is used for the same range of purposes as paper records, namely to familiarize readers with the client, to document care, to document the need for care, to assess the quality of care, to determine reimbursement rates, to justify reimbursement claims and to measure outcomes of the care process

***All students are fully responsible for following all regulations of the Health Insurance Portability and Accountability Act (HIPAA) guidelines.*** The HIPAA Security Rule establishes national standards to protect an individual's electronic personal health information that is created, received, used, or maintained by a covered entity. The Security Rule requires appropriate administrative, physical and technical safeguards to ensure the confidentiality, integrity, and security of electronic protected health information. The Security

Rule is located at 45 CFR Part 160 and Subparts A and C of Part 164. The security rule adopts standards for the security of electronic protected health information to be implemented by health plans, health care clearinghouses, and certain health care providers.

***Listed below are student requirements and expectations for upholding confidentially regarding patient records in the clinical setting:***

- Patient/Client confidentiality is to be always upheld, whether in hard copy paper form or in an Electronic Health Record. Conversations concerning clients and diseases, between students and/or others (either in the institution or away) should only be those which are professional and necessary. Students must adhere to professional standards for all communication including maintaining confidentiality, proper conduct for communication, and communicating appropriate material. Students are fully responsible to ensure that they always adhere to the regulations whether at school, at clinical, or on break.

- ***The client's EHR is a legal document and may not be photocopied or printed for any reason, according to facility policy. Photocopying of a medical record is a HIPAA violation and will result in disciplinary action.***

- Research of a medical record is for the purpose of the RCP Program curriculum and course requirements only. ***Personal Health Identifiers (PHI) must be removed from any client data collected by the student.***

- Students will use passwords to protect access to information. These passwords are never to be disclosed to another individual.

- ***Students do not have authorization to review medical documents of clients not assigned to them unless review is authorized by the instructor. Students also do not have authorization to review electronic health records of any personal acquaintances such as a family member or friend, under any circumstance.***

- Electronic Medical Records may only be accessed while present at the clinical site AND only during approved clinical rotations. Students will follow clinical site protocols for review of medical records. ***Accessing an Electronic Medical Record while off-site is considered a HIPAA violation and will result in disciplinary action.***

- Handheld electronic devices (I-pads, smartphones, etc.) may be used to obtain educational information such as the use of an electronic drug book. ***The device must be kept silent and cannot be used for personal use at a clinical site.*** It is at the instructor's discretion to disallow electronic devices during the clinical experience.

- ***Using the internet for personal, non-school related functions while at a clinical site is strictly prohibited.*** Inappropriate internet access/usage or violation of HIPAA guidelines is cause for termination from MHPC RCP Program. (See MHPC RCP Program Disciplinary Guidelines.)

- Students will annually sign the MHPC RCP Electronic Compliance Form (Authorization to Access/Use PHI) prior to entering any clinical setting. This form will be placed in each student's file.

***Violation of client confidentiality or clinical site medical access policies will result in disciplinary action up to and including dismissal from the RCP Program. Violation of client confidentiality with malicious intent will result in dismissal from the Program and can also carry federal charges.***

## USE OF SOCIAL MEDIA

Students are personally responsible for the content they publish on social media sites, blogs, other websites, wikis, forums, or any other form of user-generated content. There should be no expectation of privacy using social media sites. The college reserves the right to examine material stored on or transmitted through its facilities if there is cause to believe that the standards for acceptable and ethical use are being violated by a member of the college community. Students should not be "friends" with instructors on social media sites until after completion of the Program.

Students are expected to comply with all state, local, and federal requirements governing the privacy of medical information, even when they are not at the clinical site. This includes conversations with family, friends, and peers. Students will be held accountable for maintaining the privacy of any information they obtain, see, or are given during their clinical rotations. To uphold the privacy of such information, students must not post or discuss any clinical experience. Any information regarding the student's experience with the clinical site, its staff, or its clients/patients cannot be posted on any internet social media (Facebook, Twitter, emails, Myspace, Snapchat, Instagram, and any other platform not mentioned). The use of social media outlets (i.e. Facebook, Twitter, Instagram, Text messaging, etc.) is strictly prohibited in all capacities related to the MHPC RCP Program experience. ***The posting of pictures, comments or discussions addressing any classroom and/or clinical experience on any of these sites could result in immediate dismissal from the Program.***

Though social media can be a fun and rewarding way to share life and opinions with family and friends, it can also present certain risks. It carries with it certain responsibilities, and a student must be thoughtful about what is shared online and consider how it may appear to future employers. ***Inappropriate postings that may include discriminatory remarks, harassment, threats of violence or similar inappropriate or unlawful conduct will not be tolerated and may subject a student to disciplinary action up to and including dismissal from the Program.***

## CLINICAL POLICIES

- Student Clinical File: The student's clinical file must be complete prior to the first day of clinical. This includes proof of current PPD (2-step), etc. Students with incomplete files will not be able to attend clinical and will receive a clinical absence make-up assignment for each day of clinical missed.

- Client Confidentiality: Confidentiality is to be always upheld. Conversations concerning clients between students and/or others (either in the institution or elsewhere) should be only those which are professional and necessary. The client's chart is a legal document and ***may not be photocopied or printed for any reason***. ***Students do not have authorization to review medical documents of clients not assigned to them unless review is authorized by the instructor.***

- Punctuality: If tardiness is anticipated, students must notify the instructor at the institution at least 15 minutes prior to the scheduled time of work. Students who are tardy may not be allowed in the clinical area and may be considered absent for the day. ***Failure to notify the instructor of absence or tardiness may be considered as cause for dismissal.***

- Professionalism: A student will be asked to leave the clinical setting (considered an absence) by the instructor for unsafe and/or unprofessional behavior. Possible examples include, but are not limited to the following:

- lack of or incomplete preparation
- illness
- appearance not in compliance with dress code
- inability to meet client's needs
- under the influence of drugs and/or alcohol
- uses tobacco while in uniform or any odor of tobacco or high fragrant
- cell phone/smart watch disruption
- violation of the Code of Professional Conduct and Student Civility Policy

- Clinical Late Assignment Plan for Success: Failure to submit written work on time will result in the student receiving a Clinical Late Assignment Plan for Success. The student must meet with their instructor to develop a plan for success after one late clinical assignment. Each additional assignment that is submitted late or completely omitted will result in a Clinical Learning Plan for Success. Students may not accumulate more than two Clinical Late Assignment Plans for Success in a 16-week semester and one in an 8-week semester. To accrue more than this limit results in review of the students' clinical performance by the faculty. Directives to the student from the faculty may include probation and/or dismissal from the Program. Any student placed on probation due to clinical performance shall receive at least one letter grade lower than that earned. (For example, if a student has a letter grade of "C", probation status would result in a letter grade of "D" being issued.)

- Clinical Learning Performance Plan for Success: If the instructor identifies that the student is not meeting objectives during clinical performance (clinical site, laboratory, or virtually), a learning contract will be initiated. The Clinical Learning Plan for Success notifies the student that clinical objectives are not met and a plan for appropriate remediation is identified to promote student success. The student will not be readmitted to clinical until the requirements of the Clinical Learning Plan for Success have been fulfilled. If the Clinical Learning Plan for Success concerns written work, the student will be readmitted to clinical ***ONLY*** at the discretion of the individual instructor. Failure to fulfill the requirements of a Clinical Learning Plan for Success could result in probation and/or dismissal from the Program. Students may not accumulate more than two Clinical Learning Plans for Success in a 16-week semester and one in an 8-week semester. To accrue more than this limit results in review of the students' clinical performance by the faculty. Directives to the student from the faculty may include probation and/or dismissal from the Program. Any student placed on probation due to clinical performance shall receive at least one letter grade lower than that earned. (For example, if a student has a letter grade of "C", probation status would result in a letter grade of "D" being issued.)

## ADDITIONAL CLINICAL EXPECTATIONS

- The student may not leave the assigned clinical unit unless he/she has permission from the instructor/preceptor (i.e. parking lot, car, etc.).

- Clients should be referred to by name only, never by room number or diagnosis.

- Students should do procedures ***only*** under the supervision of the instructor or MHPC preceptor. Only skills that have been checked off in the lab setting can be performed in the Clinical setting.

- Students are never permitted to witness any legal documents.

- Students are expected to make good use of clinical time working with clients and assisting other team members, if time permits.

- Students may rotate on day, evening or night shift Clinicals.

- Students should assume responsibility for the proper use and care of equipment. If a student damages any article, he/she must report the damage to the instructor/preceptor. No equipment is to be taken out of the facility.

- Students that have been asked to permanently leave a facility or are deemed ineligible for clinical work at that facility, and cannot meet objectives at another approved site, may be dismissed from the Program.

- Students will communicate with peers, members of the health team, and clients in a quiet, professional manner.

- Students will be eager at every opportunity to provide patient care, if not a an assessment plan is given.

- Students will conduct themselves in a professional manner in the clinical areas.

- Students must follow clinical site policies as well as MHPC RCP Program policies. Failure to follow these policies violates the Code of Conduct and Civility policy and can result in probation or dismissal from the Program.

## CLINICAL ATTENDANCE

- Clinical experience is vital for learning and professional development. Make-up of clinical days missed due to weather will be determined by the Program faculty and Director. Specific recommendations will be made for additional experience at the discretion of the Program faculty.

- A student ***may not accumulate more than 2 clinical absences within a 16-week semester or 1 in an 8-week semester.*** Accruing clinical absences may affect the clinical grade negatively or be grounds for probation or Program dismissal.

- If clinical absence is unavoidable, it is the student's responsibility to:
  1. ***Speak to the instructor two hours prior to the scheduled clinical day.*** Student-Instructor contact **MUST** be made before clinical begins. A written clinical make-up Plan for Success will be developed between the student and the appropriate instructor for the missed experience.
  2. A student who is not able to attend a clinical day must inform the clinical affiliate a minimum of ***two hours*** before the departmental shift starts.
     - It is advised that the student request the name of the individual taking the message so that if there is confusion about whether a student called in, the student has verification.
  3. The student is also required to email the Director of Clinical Education AFTER the call to the hospital and inform the DCE of the absence as well as the name of the person that received the call-in at the site.
  4. A "time exception" must be placed in Trajecsys to account for the missed hours of the shift
     - Failure to place a time exception will result in automatic point deductions and count as a missed clock
     - A comment needs to be placed that includes the person whom the student spoke with and the time. Don't leave a message, speak with someone.
  5. If a student fails to inform the clinical site and/or the Director of Clinical Education that he or she will not be able to come to the clinical, the student will be counted absent for the day. A no call/no show maybe grounds for discipline or dismissal from the program.

***The Clinical Absence Plan for Success must be initiated within 24 hours of initial notification of absence, and it is the student's responsibility to initiate this plan. The specific terms of this contract will be set forth by the instructor and shall include a deadline for completion.***
of terms. (Possible examples include, but are not limited to, presentation of a formal post-conference, development of a written research paper, attendance of clinical make-up, attendance of clinical make-up experience that may include a special clinical fee at the student's expense.) Failure to satisfactorily initiate and/or complete the terms of the contract as specified, including the deadline, will be grounds for re-evaluation of contract and may be grounds for dismissal from the Program

## CLINICAL ATTENDANCE REPORTING IN TRAJECSYS

1. Clinical attendance is documented in Trajecsys. The student must clock-in and clock-out in Trajecsys from within the Respiratory Care Department at their clinical site. This must be done on a computer within the RT Department.
    - If a student's GPS location does not match the dropped GPS pin location of the respective Respiratory Care Department, it will count as a missed clock.
    - If a student fails to clock in or out, an email must be sent to the DCE along with the Preceptor/Supervisor cced.
    - After two missed clocks, each missed clock will result in a tardy.

2. Tardy = 1-15 minutes late to clinic
    - Two tardies = 1 absence

3. Absence = not attending clinic OR ≥ 15 minutes late to clinic or leaving ≥ 15 minutes early from clinical
    - If a student is more than 1 hour or leaves 1 hour early, the absence must be made up.

4. Absences will be made up at the discretion of the Director of Clinical Education.
    - Students will reschedule all clinical time missed with the clinical site via email will be sent with the new date and hours including the Preceptor/Supervisor of the location cc'd.

5. Excessive absences (more than the allowed number) will result in a **10% deduction** in the cumulative grade for each clinic day missed. The number of allowed absences for each course is as follows:
    - RC 120 Clinical I: 1 absence allowed
    - RC 170 Clinical II: 2 absences
    - RC 220 Clinical III: 2 absences

6. Call-In Procedure
   A student who cannot attend a clinical day must inform the clinical affiliate a minimum of ***two hours*** before the departmental shift starts.
    - It is advised that the student request the name of the individual by taking the message so that if there is confusion about whether a student called in, the student has verification.
    - The student is also required to email the Director of Clinical Education AFTER the call to the hospital and inform the DCE of the absence as well as the name of the person that received the call-in at the site.

- A "time exception" must be placed in Trajecsys to account for the missed hours of the shift
    - Failure to place a time exception will result in automatic point deductions and count as a missed clock
    - A comment needs to be placed that includes the person whom the student spoke with and the time that they did so
- If a student fails to inform the clinical site and/or the Director of Clinical Education that he or she will not be able to come to clinical, the student will receive a minimum **10% deduction** in the cumulative grade.

## CLINICAL ABSENCE

Students are expected to attend all clinical dates. If a student becomes ill during clinical rotation, the student will be responsible for making up any missed time. The student is responsible for notifying their site and the Director of Clinical Education of the illness as soon as possible.

All missed clinical hours must be made up at a time approved by the site. Students should make every attempt possible to make up missed time on the same day of the week the student is scheduled at the facility or at the time that best fits the clinical site. The MHPC DCE must be notified of any time extensions beyond the original dates. A passing grade is dependent upon meeting the attendance requirement for each clinical experience as well as any assignments outlined in the corresponding course syllabus. Students may be dismissed from the RCP Program due to absenteeism or tardiness during clinical rotations.

## EXCUSED ABSENCES

The following conditions are accepted as excused absences:

- Documented medical emergency/hospitalization of the student/with appropriate written guidance from medical provider
- Military duty, must provide the order
- Funeral leave for an immediate family member, must provide the card
- Jury duty, must provide the order
- The student will be required to present official documentation to the Director of Clinical Education within 24 hours, for the absence to be excused.
- Excused absences are required to be made up.

## CLINICAL REMEDIATION

Remediation is a process to assist students with their professional development. The focus can be on either the student's present knowledge base or professional behaviors. This process is designed to guide the student toward the successful completion of their clinical experience. The remediation process is most effective when initiated early in the clinical rotation. The clinical remediation process can be called into action by the student, site educator, Course Instructor, Program Director, or Director of Clinical Education. If the student believes there is any potential cause for concern, he/she should contact the DCE immediately as a delay in the remediation process significantly decreases the chance of successful and timely completion of the rotation.

***During remediation, the following steps will take place:***

- The concern or problem will be identified.

- A review will be done of the students' clinical and academic history to identify a pattern of concerns.

- Identification of strategies to address concerns will be formulated by the student, faculty and clinical site representative.

- A Remediation Plan for Success will be written outlining who will be responsible for the action steps. This will include measurable student objectives developed by the student under the guidance of the DCE, Educator, and/or Program Director.

- Faculty, along with student and clinical site input, will decide how to or whether to continue with the present clinical experience.

- Ongoing communication with both the student and the clinical site will occur throughout the remaining clinical rotation by the DCE to ensure that the student maintains the clinical site's performance expectations.

- Necessity of an onsite visit by the DCE will be determined in conjunction with the student. The DCE reserves the right to schedule an unannounced visit to review the students' performance.

## OTHER IMPORTANT CLINICAL INFORMATION

A. **Service work Statement**

Respiratory care students must not be substituted for paid staff during clinical time. This is to ensure that students gain experience, complete the required competencies and skill sets, and are not used simply for backlog work in the absence of appropriately paid staff.

B. **Workload**

The workload will be assigned to the student by the clinical preceptor or designated employee. The workload assigned will be at the student's appropriate level of experience.

C. **Breaks**

The student is entitled to lunch as per affiliate employee regulation. The student cannot leave the hospital complex during the clinical day.

D. **Studying**

Studying while at the clinical site is allowed only by permission of the preceptor. Studying should only be done when there is downtime, and no therapy is being given at that time.

E. **Parking**

Students should park in the employee lot, unless stated otherwise. Students should inquire about such parking tags at the start of each rotation.

F. **Supplies**

Black pens and a small notebook, four-function calculator and stethoscope (Littman brand, Classic II or III are recommended). Do not bring valuables to clinicals

**Grading for Clinical Courses**

The grade for a clinical course is determined by the student's completion of requirements for the clinical site and the clinical application class. The grading scale is as follows:

Grading Scale: **92.0 – 100% A**
**83.0 – 91.0% B**
**75.0 – 82.0% C**
**70.0-74.0% D**
**00.0 – 69.9% F**

**A score of 75%, (a grade of "C"), or better, is required to pass each course and continue in the Respiratory Care program.**

Clinical grades will be computed using the following (see each clinical syllabus for variations)

1. Clinical evaluations of the student will be completed by the Preceptor at the clinical facility.
    - These evaluations must be reviewed by students on Trajecsys to receive a grade and complete the clinical course.
2. The student's ability to become proficient at objectives and complete performance evaluations.
    - All performance evaluations must be completed by the end of the program.
3. The completion of all required assignments which includes but is not limited to time logs, daily log sheets, physician interaction logs, and clinical site and instructor evaluations.

Students who are withdrawn from the program, for any reason, will be required to demonstrate proficiency of knowledge and skills as deemed necessary by the Director of Clinical Education PRIOR to being placed back into clinic.

# RCP Program Lab & Clinical Professional Appearance/Dress Code

Students must uphold the dress code during all lab & clinical rotations. All clinical sites may have their own requirements of dress code. It is the responsibility of each student to follow these requirements. Failure to comply may result in a reduction in the clinical grade, removal from the clinical site, clinical probation, or program termination.

- Steel Gray Scrub tops & pants purchased (color from Scrubs & Beyond). They must fit your body for bending, stooping, reaching. They must be hemmed if they are too long.
- A MHPC RCP Student ID must be always worn. (If a student is employed at any facility, the student may not wear the MHPC student ID while at work.)
- ***Shoes must be professional, clean, non-canvas, closed-toed, & able to provide comfort for 12 hours.***
- A watch, with a second hand, must be always worn.
- Personal hygiene must be maintained. Prior to attending ***ALL*** Lab & clinical experiences, students are expected to bathe, apply deodorant, and brush their teeth.
- Hair should be neat, clean, and worn appropriately. Extreme hair styles and/or non-natural/fad colors, including sprayed coloring, are not appropriate, natural looking is key. For infection control purposes, hair should not be hung over or encounter with clients or equipment. (Students with hair length below the neck should tie their hair back securely and off the face. In certain areas/departments, additional measures like hair covering or hair nets may be required.)
- Facial hair must be neatly trimmed, groomed and fit appropriately into an N95 mask.
- Fingernails must be kept short and clean. Only regular polish with short natural ¼ inch tips is allowed.
    - ***(No artificial nails, gel, dip, or nail tips are allowed at Clinical.)***
- Hand jewelry is limited to one ring only and earrings must be small and in good taste. (Only one set of stud posts are allowed.) Body piercings must not be visible and must be covered tastefully. Facial piercings and tongue piercings are not allowed. "Gauge holes" must be filled with a clear or flesh-colored plug. Jewelry is a source of infection. Choosing not to wear it is best practice during lab and Clinical.
- Tattoos on the head, face, neck, and scalp must be covered. MHPC faculty and staff reserve the right to assess the appearance of visible tattoos to determine if they are appropriate to be visible. Tattoos based on racial, sexual, religious, ethnic, or other characteristics of a sensitive or legally protected nature must be non-offensive.
- Make-up may be worn but must be in good taste, and natural.
- Perfume /cologne is not allowed.
- ***Smoking, Vaping or consuming alcohol in MHPC uniform is not allowed and students should be free from the odor of smoke or other offensive odors.***
- Personal cell phones and other means of electronic personal communication are NOT to be carried in the clinical setting, unless approved by the clinical facility and the clinical instructor.

# HEALTH AND SAFETY GUIDELINES

## Occupational Risks/Communicable Diseases

Individuals who choose to undertake training in Respiratory Care should be aware of the risks associated with healthcare training and professional practice. It is the student's responsibility to follow standard precautions to prevent exposure to communicable diseases. Healthcare students and professionals utilize standard precautions to reduce the risk of infectious disease exposure; however, these measures do not eliminate the risk that a student or healthcare provider may become infected.

During healthcare training in both the lab and clinical setting, students will come into close contact with their instructors, classmates, and patients. Students should make informed choices regarding their education and career. As with any healthcare position, Respiratory Care Practitioners could encounter any of the hazards listed below. (This list does not include all the hazards that could be encountered.)

- Exposure to infectious diseases such as TB, RSV, and Covid
- Exposure to bloodborne pathogens and biological hazards such as Hepatitis and HIV
- Sharps injuries
- Chemical and drug exposure
- Ergonomic hazards from lifting, sitting, and repetitive tasks
- Latex allergies
- Stress

If a student has concerns about his/her personal risk level, his/her healthcare provider should be contacted. Students should review all CDC links provided below to ensure that they are well informed regarding the risks associated with healthcare and the preventative measures used to mitigate these risks.

- CDC: Workplace Safety and Health topics: Health Care Workers
- CDC: Infection Control: Standard Precautions for all Patient Care
- CDC: Sequence for Putting on PPE and Safe PPE Removal

## Exposure/Event Reporting

Any break in the integrity of the skin should be covered while in the clinical area and reported to the instructor. In the event of student exposure by splashes, needle-stick, puncture wounds, or by any other means, it is the responsibility of the student to follow the three steps below for reporting the incident. The faculty member, clinical instructor, or preceptor will then confer with the clinical facility's designated employee risk department and write a complete report of the incident.

- Step 1: Report the incident immediately after the exposure occurs to the appropriate person at the healthcare facility.
- Step 2: If the injury involves a potential exposure to infectious material/bloodborne pathogens, the student should follow the clinical site's protocol for BBP exposures, including washing exposed skin with soap and water and/or flushing exposed mucous membranes with water.
- Step 4: Student seeks medical attention for immediate treatment/testing/follow-up as needed. Students are responsible for all costs associated with their treatment/testing/follow-up.
- Step 5: Student and clinical instructor complete the clinical site's and home college's injury/exposure incident report form and submit the form per organizational policy/procedures.

## Health Maintenance and Extended Medical Leave

Students are responsible for their own health maintenance throughout the Respiratory Care Practitioner Program and are strongly advised to plan for adequate health insurance coverage. ***Neither the MHPC partner college nor any healthcare agency where the student obtains clinical experience is responsible for needed medical care or for any occupational hazards encountered during the course of study.*** It is the responsibility of each student to recognize potential safety hazards in the clinical area (i.e. exposure to anesthesia gas or radiation, infectious agents, allergens, etc.), and to immediately inform the faculty of any health problems that might interfere with clinical experiences. If, at any time, the faculty member or their proxy feels that the student or client's health may be compromised, the student will be asked to leave the clinical area. Any treatment or referral to a consulting physician will be at the student's expense.

If an issue should arise requiring extended medical leave for the safety of the student, the student will be required upon diagnosis to bring a written statement from the physician permitting the student to continue in the RCP Program at a level that allows him/her to meet all clinical/course objectives and Essentials Functions. ***A written statement from the physician is mandatory for any extended medical leave.*** If the physician has deemed it necessary to place physical restrictions on the student, these restrictions must be delineated in the written statement from the physician. A student who has been given a medical restriction will not be allowed to attend clinical until a written permission/release has been given from the physician. ***A written statement of permission/release is mandatory to return to clinical.***

Each request for extended medical leave will be reviewed for eligibility by the RCP Program Director and the Director of Clinical Education. All decisions and stipulations for progression will be made by the Program Director and DCE in compliance with Title IX, the ADA, and clinical affiliations.

The student will be allowed 2 weeks for medical leave and must assume responsibility for obtaining any notes. To complete the course, the student must complete all theoretical requirements. All missed exams must be taken by the date specified by the instructor. The dates will be set according to the situation and condition of the student. The student must also demonstrate competence in all clinical objectives for the course. This can be determined at the time of the medical leave or at the end of the semester if the student returns to clinical before the semester ends. Clinical make-up will be contingent upon the student's ability to meet clinical objectives. The student shall pass the course if he/she has a passing theory grade when the theoretical portion has been completed, and a clinical grade of satisfactory. These requirements must be met before the beginning of the subsequent RCP Program courses, unless otherwise stipulated by the RCP Program Director and the Director of Clinical Education.

## Use of Human Subjects for Training Purposes

To become proficient in the skills required by a Respiratory Care Practitioner, students will be asked to volunteer as patients during classroom and lab activities. If a student does not feel comfortable acting as a patient for a particular skill(s), it is the responsibility of the student to communicate with the instructor(s) that they do not give consent to be used as a patient for practice in that skill. In absence of this communication, it will be assumed that each student does give his/her consent to be used as practice by the instructors and other students for all respiratory therapy skills. It will also be assumed that the student understands the risks involved in receiving these interventions.

## Latex and Other Allergens

The MHPC RCP Program will attempt to maintain a latex and allergen safe environment. Unfortunately, it is NOT possible to assure a latex-free or other allergen-free environment in either the lab or clinical settings. Any student with an allergy, either latex or other, must notify the clinical lab instructor prior to entering the lab or clinical setting. ***It is the student's responsibility to avoid causative allergens or latex whenever possible and to take the appropriate measures should an allergic reaction occur.***

## Clinical Vaccination Requirement

Each clinical agency enforces specific health requirements, and the RCP student is obligated to meet the current requirements of the agencies in which clinical experiences are provided. Proof of current immunization and selected diagnostic testing such as tuberculin testing, rubella vaccine, or titer levels will be required prior to entering clinical agencies.

The MHPC RCP vaccination policy is determined by the requirements and standards of the individual clinical partner. Documentation received from a student will be submitted to each clinical site. The clinical site will then determine if the vaccination requirements are met or if medical/religious exemptions will be approved for their specific site. ***A student who does not meet vaccination requirements or has not received an exemption approval from the clinical site will be prohibited from participating in clinical education and will be dismissed from the RCP Program.*** Should the clinical site change their requirements during the RCP Program course, students will be required to meet the new standard or will be prohibited from participating in clinical education.

Students with approved vaccination exemptions must still abide by clinical facility mandates such as PPE or communicable disease testing on a regular basis. If a student is unable to comply with the clinical facility mandates, this would be considered a clinical absence and may prevent the student from continuing in the RCP Program. (Please refer to "Clinical Policies" for more information.)

***Students with concerns regarding the vaccination policy should schedule an appointment with the Program Director or Dean as soon as possible.***

Students are required to remain up to date on all necessary clinical requirements for the duration of the clinical curriculum. After beginning clinicals, items such as annual influenza vaccination, annual appropriate TB screening (every 12 months), current TDAP (every 10 years) and current American Heart Association BLS (every 2 years) are all items that the student is responsible for maintaining. Depending on where the renewal date of certain clinical requirements may fall, the DCE may request that the student complete these requirements earlier than listed above when necessary. Failure to remain current with these requirements, and/or comply with a written request to complete before any stated due date will result in immediate cessation of participation in any scheduled clinical experience (and subject to any grade deductions for absences outlined in the course syllabus) and be subject to disciplinary action, including possible dismissal from the program.

# Immunization Guidelines

Students in the MHPC Respiratory Care Practitioner Program must provide proof of immunity to measles, rubella, and varicella-zoster (chickenpox). ***If acceptable proof of immunity is not available for measles/rubella, the individual is required to receive the appropriate immunization with proper precautions taken for Rubella.*** Students must submit one of the required items below for each individual immunization.

- **MEASLES**
  - Note signed by the physician stating that the individual has had the disease (Date of disease must be included.)
  - Proof of immunity by serological (blood test) screening which reads "reactive" (Date of the screening must be included.)
  - Immunization record including dates of the last two (2) vaccinations

- **RUBELLA**
  - Proof of immunity by serological (blood test) screening which reads "reactive" (Date of the screening must be included.)
  - Immunization record including dates of the last two (2) vaccinations

- **VARICELLA-ZOSTER (CHICKENPOX) or SHINGLES**
  - Proof of immunity by serological (blood test) screening which reads "reactive" (Date of the screening must be included.)
  - Immunization record including dates of the last two (2) vaccinations

- **TETANUS, DIPHTHERIA & PERTUSSIS (T-DAP)**
  - Immunization record including dates of all immunizations (Dates must include the original series of 3 T-DAP immunizations plus a recent tetanus booster which was given in the last 10 years.)

- **HEPATITIS B**
  - Immunization record with dates showing that the individual has initiated the Hepatitis B vaccination series (It is recommended that a student speak with his/her healthcare provider regarding immunity if the Hepatitis B immunizations are more than 10 years old.)

- **INFLUENZA**
  - Clinical sites require an annual influenza vaccination. ***Proof of vaccination is required each year by October 15th or the date specified by the clinical site.*** It is the student's responsibility to maintain compliance with clinical site requirements.

- **COVID-19**
  - ***If you have been vaccinated, please provide proof. If you have not been vaccinated, please provide the rationale in the form of a signed and dated letter. Clinical sites are requiring this information if individual is not vaccinated.***

# Tuberculosis Testing

Tuberculosis testing is required for all students before attending clinical during the first semester and also annually until graduation. The RCP Program supports the recommendation of The Missouri Division of Health to use the intradermal injection method using a ***2-step testing method consisting of 2 separate injections given 2-3 weeks apart.*** In lieu of this 2-step method, a QuantiFERON Gold blood test or T-SPOT will also be accepted. Second year students are permitted to use the standard one-step testing method instead of the previous methods mentioned. Problems or questions regarding tuberculosis testing should be discussed with the Program Director prior to testing.

***Proof of testing must include the testing method, the date(s) of the test, the test result, and the signature of the physician or nurse administering the test.*** This information must be submitted either on official stationery from the healthcare provider, or on the physical examination form that is required for entrance into the RCP Program.
Students who have had previous treatment for tuberculosis are required to submit the result of a recent (within the last 2 years) chest radiograph to exclude tuberculosis disease. This requirement will also apply to any student who has received a baseline or newly positive test result for *m. tuberculosis infection*. Rather than participate in annual serial testing, these students will instead be required to complete an annual symptom screen assessment.

**Source: CDC, *Recommendations & Reports, Guidelines for Preventing the Transmission of Mycobacterium Tuberculosis in Healthcare Settings***

## Respiratory Care Program

## Tuberculosis Symptom Questionnaire

***This form must be completed and returned to the MHPC RCP Program office by the date listed below.***

Student Name: _____ Return Date: _____

According to your student medical records, you have had a previous history of either a positive tuberculosis skin test, an allergic reaction to a previous skin test, a history of having received a BCG Vaccine, or other medical contraindications. X-rays are not required on an annual basis by the MHPC RCP Program, but you are required to submit an annual TB symptom questionnaire.

Symptoms of ***active*** pulmonary tuberculosis include cough, chest pain, and hemoptysis (coughing or spitting up blood). Systemic symptoms consistent with tuberculosis include fever, chills, night sweats, loss of appetite, weight loss, and fatigue. If you are currently having any of these symptoms, tuberculosis should be considered. Any student suspected of having TB will be referred to his/her personal healthcare provider for a complete medical evaluation at his/her own expense.

**Please checkmark any symptoms you are experiencing:**

| | Yes | No |
|---|---|---|
| Cough | | |
| Chest Pain | | |
| Hemoptysis (coughing/spitting up blood) | | |
| Fever | | |
| Chills | | |
| Night Sweats | | |
| Loss of Appetite | | |
| Weight Loss | | |
| Fatigue | | |

*Table 0-1 Symptoms List*

Student Signature: _____ Date: _____

**Source: CDC, *Recommendations & Reports, Guidelines for Preventing the Transmission of Mycobacterium Tuberculosis in Healthcare Settings***

## Respiratory Care Program

## Health and Wellness Survival Guide

The Respiratory Care Practitioner Program is a demanding load of course work. ***Allow time for studying and preparing yourself daily.***

***Take care of yourself by eating well and staying hydrated, especially during clinicals.***

Respiratory Care deals with death. You will find your way to process and manage the important work you are preparing to do. You can do this by working out, gardening, cooking, reading a book in a hot bath, boxing, swimming, etc. ***Find a method that works for you!***

***Ask questions and be curious about what you are seeing, doing, or reading so that you can get a better understanding.***

Teamwork makes the dream work! Doctors, Nurses, Patient Care Techs, Therapy, and Respiratory Care Practitioners are all on the same team caring for the patient. ***Get to know those relationships and how to navigate them!*** This is important to long-term success. If you're in the patient room, help do a patient turn or fill a glass of ice water.

There is a library guide designed specifically for Respiratory Care. It includes information that is helpful when writing papers, an emerging technologies librarian to answer your questions, and much more. The link to this exciting resource page is: https://eastcentral.libguides.com/RespCare

***Find ways to have fun! And be curious!***

# APPENDIX A


## Respiratory Care Program

## Exemplary Performance Form

Student Name: _____ Date: _____

Faculty: _____ Course: _____

**Area of Commendation**:

☐ Clinical ☐ Course ☐ Professional Activity

**Details of Exemplary Performance**:

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

*Congratulations on your excellent performance!*

Faculty Signature: _____ Date: _____


# Respiratory Care Program

# Grade Advisement Form

Student Name: _____ Date: _____

Faculty: _____ Course: _____

**Most Recent Exam Score**: You have received _____points from a total of _____.
**Current Course Score**: You have received _____points from a total of _____.

To be successful in this course and progress through the RCP Program, you will need to obtain a score of at least 75%. Your score reflects that you need additional assistance or changes to your academic preparedness. Please make an appointment to meet with your instructor(s) to discuss your grade advisement. Complete ***Section 1*** below and bring this document with you to the appointment. Suggested actions for improvement will be discussed during your grade advisement meeting.

***Section 1 – To be completed by the student:***
Select the appropriate reason(s) as to what ***you believe*** is the cause of your current grade.

- ☐ Inadequate exam preparation
- ☐ Poor test-taking skills
- ☐ Lack of understanding of material
- ☐ Personal distractions
- ☐ Other

***Section 2 – To be completed by faculty:***

Recommendations for study practices and resource utilization:

- ☐ Participate in a study group
- ☐ Obtain additional reference material from the faculty
- ☐ Attend all scheduled review sessions for the remainder of the semester
- ☐ Assess/modify work/home schedule to allow adequate time to study
- ☐ Review test-taking strategies

Recommendation to meet with the Program Director to discuss additional resources at this point in the semester. Options may include, but are not limited to:

- ☐ Seek counseling/learning assessment
- ☐ Seek a healthcare-related job to gain the needed exposure to necessary skills
- ☐ Other: _____

Recommended Remediation Plan:

- ☐ Complete the recommended remediation with a score of 80% or higher (This is due prior to the final exam.): _____

_____

_____

Student Signature: _____ Advisement Date: _____

Faculty Signature: _____

# Grade Advisement Form - Reflective Exam Review

Select a reason that ***you believe*** contributes to why you missed each item on the exam. Write that exam item number on the line next to the reason. After completing a review of all incorrect items, add the number of items you associated to each specific reason and put that number in the Total # column on the far right.

| Reason you missed an item | Identify the item number next to the appropriate reason | Total # |
|---|---|---|
| Did not read the question properly | | |
| Jumped to a conclusion | | |
| Missed an essential word | | |
| Incorrect math | | |
| Did not know the content | | |
| Did not understand a word or phrase | | |
| Misunderstood what the item was asking | | |
| Changed the answer but had it correct initially | | |
| Narrowed option between 2 answers and picked incorrectly | | |
| Ran out of time or felt rushed | | |
| Anxiety or panic | | |
| Careless or marked item incorrectly | | |
| Unsure why I missed it | | |

*Table 0-1 Grade Advisement Form*

## Study Options

Check the study options below that you are currently utilizing.

| | |
|---|---|
| | Meeting with Instructor for clarification – Asking for help |
| | Read/Prepare before class |
| | Rewrite or revisit your notes after class daily |
| | Study with a buddy or in a group |
| | Study alone |
| | Study outside class daily |
| | Evolve Case Studies |
| | Utilize NBRC prep book |
| | Identify other items that you do when studying: |

*Table 0-2 Study Options*


## Respiratory Care Program

## Plan for Success: Clinical Late Assignment

- The Clinical Late Assignment Plan for Success will be given to a student upon the first time during a semester that a clinical assignment is submitted late,
- A student may not accumulate more than one (1) Clinical Late Assignment Plan for success in a 16-week course.
- In the event another assignment is submitted late within the same semester, it will result in a Learning Plan for Success. ***Students may not accumulate more than two (2) Learning Plans for Success in a 16-week course***.

Student Name: _____ Date: _____

Late Assignment: _____

Reason for Late Assignment (To be completed by the student): _____

_____

_____

Faculty Signature: _____ Date: _____

Student Signature: _____Date: _____

***For details regarding Clinical Late Assignment Plans for Success, students should refer to the MHPC RCP Program Handbook under "Clinical Policies".***

## Respiratory Care Program

## Plan for Success: Clinical Learning Performance

- The Clinical Learning Performance Plan for Success is issued when an unsatisfactory level of clinical performance is assessed. This may include written work and/or clinical performance and/or lack of preparation for the clinical assignment.
- Any work assigned below is considered an opportunity for remediation by the student so that satisfactory performance levels can be achieved.
- Failure to complete the assigned work at a satisfactory level will result in an additional assessment of unexcused absence on the part of the student.
- ***Students may not accumulate more than two Clinical Learning Plans for Success (2) in a 16-week course.***

Student Name: _____ Date: _____

Reason for the Success Plan: _____

Assigned Content/Work (To be completed prior to next clinical day or as assigned): _____

_____

_____

Signature of Designated Clinical Instructor: _____ Date: _____

Student Signature: _____Date: _____

Signature of Instructor Documenting Successful Completion: _____

Date of Instructor Review: _____

***For details regarding Clinical Learning Performance Plans for Success, students should refer to the MHPC RCP Program Handbook under "Clinical Policies".***

## Respiratory Care Program

## Clinical/Lab Remediation Plan

Student Name: _____ Date: _____

Instructor: _____

Circle the Course*: Clinical I Lab I Clinical II Lab II Clinical III Lab III*

| Skill/Procedure Needed for Re-Test | Details Associated with the Required Remediation |
|---|---|
| | |
| | |
| | |
| | |
| | |

*Table 0-3 Clinical/Lab Remediation Matrix*

Amount of Mandatory Practice Time Needed in the Lab: _____

Student Signature: _____ Date: _____

Instructor Signature: _____Date & Time of Re-test: _____

***For details regarding Lab Remediation, students should refer to the MHPC RCP Program Handbook under "Clinical Expectations and Policies".***

# Respiratory Care Program

# Probation Notification

Student Name: _____ Date: _____

***This student acknowledges the following items:***

- The student has been notified of official placement on probation status in the RCP Program. This action was taken in response to the student accumulating one of the following:

  _____ More than 2 Plans for Success in a 16-week semester. Course: _____

  _____ More than 2 make-up assignments in a 16-week semester. Course: _____

  _____ Excessive Theory Absences

  _____ More than 2 Clinical Absence Plans for Success in a 16-week semester.

  _____ More than 2 Clinical Learning Plans for Success in a 16-week semester.

  _____ Other: _____

- The student has had the probation policy explained and understands the same.
- The student has been referred to the written policy in the Student Handbook and has read the same.
- The student understands that any student placed on probation shall receive at least one (1) letter grade lower than the grade earned by the student for the semester and the course with a probation status.

Student Signature: _____ Date: _____

Instructor Signature: _____Date: _____

***See the MHPC RCP Program's "Disciplinary Action Policy" for details regarding Probation Notifications.***

***For details regarding Probation Notifications, students should refer to the MHPC RCP Program Handbook under "Disciplinary Action Policy".***

# Respiratory Care Program
# Electronic Compliance Form
# (Authorization to Access/Use PHI)

Authorization to access/use PHI (Protected Health Information) is granted to the student identified below based on review and evaluation of academic need. Students must take responsibility for the security of all PHI. A signed copy of this authorization will be maintained in the student's file and can be viewed upon request.

**Section 1: The defined academic need for the authorization to use PHI**

- To collect limited information (i.e. diagnosis, medication list, history and/or physical assessment data) for care plans
- To update current respiratory care directives (i.e. look up a new drug order or new diagnosis, answer client education questions)
- To assist with communication between the student and clinical instructors

**Section 2: Student User Agreement**

- I understand that I have been granted authorization to temporarily access/use PHI for academic purposes only while I am a current student in the MHPC Respiratory Care Program. This authorization has been granted based on the defined academic needs listed above; therefore, access/usage must be limited to the use necessary to meet that academic need. I agree to follow the requirements and guidelines as stated in this User Agreement.
- I understand the definition of PHI (Protected Health Information).
- I will protect the confidentiality of client information as always required by law.
- I understand that sources of medical information, such as medical records, emergency room department and ambulance records, child abuse reporting forms, elderly abuse reporting forms, laboratory requests and results, radiological and diagnostic reports, and any element of the client medical record are protected and confidential.
- I acknowledge that conversations between healthcare professionals in a client care setting are protected and may not be discussed.
- I agree to use physical and technical safeguards for the protection of PHI, including the use of strong password protections.
- I will ensure the proper destruction of all PHI immediately after intended use, and I will not use the PHI beyond the approval period (clinical rotation).
- I will immediately report the loss/theft of any academic paperwork (care plans, case studies, journals) to the MHPC RCP Program Director even if I believe the academic paperwork did not contain PHI.
- I will not at any time access/use Social Security numbers for criminal intent such as Identity Theft.

Student Name (Printed): _____

Student Signature: _____ Date: _____


# Respiratory Care Program

# Media Consent Form

For valuable consideration, I do hereby authorize the MHPC Respiratory Care Practitioner Program and East Central College, a public corporation, and those acting pursuant to its authority to:

- Record my participation and appearance on video tape, audio tape, film, photograph, digital media or any other medium.
- Use my name, likeness, voice, and biographical material in connection with these recordings.
- Exhibit or distribute such recording using a private digital video network, or other mechanisms, in whole or in part without restrictions or limitation for any education purpose which East Central College, a public corporation, and those acting pursuant to its authority, deem appropriate.
- To copyright the same in its name or any other name it may choose.

I hereby release and discharge MHPC and East Central College, a public corporation, its successors and assigns, its officers, employees and agents, and members of the Board of Trustees, from any and all claims and demands arising out of or in connection with the use of such images, audio, photographs, film, tape, or digital recordings including but not limited to any claims for defamation or invasion of privacy.

I hereby consent to the release of said video tape, audio tape, film, photograph, digital media or any other medium for the above-stated purposes and in accordance with the terms stated above, pursuant to the consent provisions of the Family Educational Rights and Privacy Act, 20 U.S.C. 1232 et.seq.

Student Name (Print): _____ Phone: _____

Address: _____
Street Address City State Zip code

Signature: _____ Date: _____
***(Parent/Guardian Signature if under 18.)***

# Respiratory Care Program
# Records Release/Consent to Release Information

East Central College and MHPC comply with the Family Educational Rights and Privacy Act of 1974 (FERPA)*, a federal law that protects the privacy of student education records. All information other than directory information is restricted and will not be released without first obtaining the student's signed consent. East Central College defines directory information as follows:

- Student Name
- Parents' Names
- Address
- Telephone Number
- Date and Place of Birth
- Major Field of Study
- Participation in Officially Recognized Activities and Sports
- Dates of Attendance
- Most Recent Previous School Attended

I authorize the release of additional information to the person(s) listed below for the purpose of discussing my academic progress at East Central College.

Release Information to: _____

- I agree to notify the Allied Health Office if my file has restrictions for the release of general information.
- I allow the release of information to potential employers regarding academic and clinical performance, as requested.
- I allow the release of information to clinical sites regarding academic and clinical performance, understanding that this may also include criminal background checks, drug screening results or other information per contractual agreement.
- I acknowledge that this release is valid from the date of signature forward.

Student Name (Print Legibly): _____ Student ID: _____

Student Signature: _____ Date: _____

Witnessed by: _____ Date: _____

*FERPA contains provisions for the release of personally identifiable information without student consent to financial aid organizations, health agencies in emergencies, court officials, third parties with valid subpoenas and others as defined in the provisions of the Family Educational Rights and Privacy Act. Please consult the East Central College Registrar if you have questions regarding FERPA.


# Respiratory Care Program

# Criminal Background Policy/Consent

## Criminal Background Policy

RSMo 660.317 prohibits a hospital, or other provider, from knowingly allowing those who have been convicted of, pled guilty to or nolo contendere in this state or any other state or has been found guilty of a crime, which is committed in Missouri would be a Class A or B felony violation, to give care to clients in their agency. As defined by state law, these are violations of chapter RSMo 565 (domestic violence/violence against a person), RSMo 566 (sex offenses) or RSMo 569 (robbery, arson, burglary or related offenses), or any violation of subsection 3 of section 198.070 RSMo (abuse and neglect), or section 568.020 RSMo (incest).

RSMo 660.315 requires an inquiry whether a person is listed on Missouri Department of Health and Senior Services disqualification list. In addition to these records, an on-line search will be conducted to determine if a student is on other government sanction lists. These on-line searches include Office of Inspector General (OIG) and the General Services Administration (GSA). As a requirement of the application process for the MHPC Respiratory Care Program, in response to RSMO 660.317b and 660.315, students accepted into the Program will be required to consent to release their criminal history records (RSMo 43.450) for the sole purpose of determining the applicant's ability to enter client care areas in order to fulfill the requirements of the RCP Program.

Any student who is found to have a criminal history for a class A or class B felony, as defined by state law, or is found to be on one of the governmental sanction lists will not be able to continue enrollment in the MHPC Respiratory Care Program. Additionally, acceptance into and completion of the Program does not guarantee licensure. A criminal conviction may affect a student's ability to be placed in a clinical site and a graduate's ability to sit for the Respiratory Therapy Exam administered by the National Board for Respiratory Care (NBRC) or attain State Licensure. ***Students currently serving probation are ineligible for admission and may be ineligible for admission if the criminal offense is recent in nature.***

## Criminal Background Consent

East Central College and the MHPC is hereby granted my permission, consent, and authorization to obtain all background check information maintained on me by the Missouri Highway Patrol, the Missouri Department of Health and Senior Services (sanction list) and any agency thereof, the FBI and any other law enforcement agency of and state of the United States, the Office of Inspector General (sanction list) and the General Services Administration (sanction list). I understand that at this time, only the Missouri Highway Patrol background check will be obtained to determine class A and class B felonies, but ECC/MHPC is hereby authorized to obtain the other background information listed above. The information received by the Admission's and Retention Committee will remain confidential (RSMo 43.540) and will be used for the sole purpose of determining my ability to enter client care areas in order to complete the requirements of the Respiratory Care Program. I hereby consent to the use of such information as stated in this disclosure consent.

I understand that if my criminal history, regardless of the criminal classification, prohibits my placement in the clinical setting, I will not be able to complete the MHPC RCP Program. I also agree to notify the Program Director of any criminal charges/convictions that may occur during enrollment in the MHPC Respiratory Care Program.

Full Name (Print): _____ SS#: _____

Maiden/Alias Name(s): _____
(Include all names you have been known as.)

Date of Birth: _____ Place of Birth: _____

Address: _____
Street Address City State Zip code

Signature: _____ Date: _____

Witness Signature: _____ Date: _____


# Respiratory Care Program

# Substance Abuse Policy/Consent

## Substance Abuse/Drug and Alcohol Policy

The MHPC Respiratory Care Program adheres to the East Central College policy on a drug and alcohol-free environment and intends to comply with the Drug and Alcohol Abuse Program and the Drug-Free Schools and Communities Act Amendments of 1989. Several programs are available on campus and in the community to promote alcohol and drug awareness. Violations of this policy can result in disciplinary action up to and including discharges for employees, dismissal for students, and referral for prosecution. Violations of this policy by students will be considered violations of the college disciplinary code, which may result in dismissal, suspension, or imposition or a lesser sanction.

The ECC Drug and Alcohol Policy states: "The unlawful manufacture, distribution, dispensation, possession, or use of a controlled substance, narcotics, or alcoholic beverage on college premises or off-campus sites, or college sponsored functions is absolutely prohibited." To ensure compliance with the Drug Free Schools and Communities Act Amendments of 1989, RCP Program students will be tested as a condition of admission, readmission, or transfer to the RCP Program and upon any reasonable suspicion. Further details can be found, including disciplinary action, in the student handbook and ECC Board Policy.

Students in clinical agencies are subject to the policies of the MHPC partner colleges and must also abide by the policies of the agency in which they are practicing as a student in the RCP Program. The MHPC Respiratory Care Program Director must authorize reasonable suspicion testing on a student before such a test is administered. In the absence of the Program Director, the Director of Clinical Education, faculty, or designated administrator may authorize a test. Reasonable suspicion may include, but not be limited to accidents and injuries caused by human error, unusual or serious violations of rules, secured drug supply disappearance, irrational or extreme behavior, or unusual inattention or personal behavior, such as smelling of alcoholic beverages. A student may be required to have alcohol or drug testing alone or in combination. A student may not return to the clinical agency assigned until verification that the random drug test was negative. The student will be required to make up for missed clinical experiences.

***An RCP Program student who refuses to authorize and pay for initial or subsequent testing or who tests positive for drugs, alcohol, or controlled substances will not be allowed to continue in the Respiratory Care Program.*** A student who tests positive for a drug or controlled substance must be able to verify that it was obtained legally and legitimately. If an initial drug or controlled substance test is positive, a second test on the same specimen will be performed to confirm the initial result. A positive test result on the confirming test will result in dismissal from the RCP Program. If an alcohol test is positive, a second test will be performed to confirm the initial result. Any confirmed alcohol result above 0% will be considered positive. A positive test result on the confirming test will result in dismissal from the RCP Program. Any student dismissed following a positive drug, controlled substance, or alcohol test will be removed from all RCP courses. A grade of "W" will be transcribed if prior to the college withdrawal date. A grade of "F" will be transcribed if the student is removed from courses following the college withdrawal date. Dismissed students will not be considered for admission.

Students must abide by the terms of the above policy and must report any conviction under a criminal drug statute for violations occurring on or off college premises. A conviction must be reported within five (5)

days after the conviction. Students convicted of involvement in a criminal drug offense will be dismissed from the Respiratory Care Practitioner Program.

Offers of acceptance into the RCP Program are made as conditional offers. These conditions include a negative drug and/or controlled substance test. An applicant who refuses to authorize and pay for testing or who tests positive for drugs, alcohol, or controlled substances will not receive a final offer of admission into the Respiratory Care Program. Student acknowledgement/consent forms regarding the RCP policy on drugs, alcohol, and controlled substances will be signed when a conditional offer of admission to the RCP Program is made. Policies will be reviewed with students during the admission process and during clinical orientation each semester.

## Drug and Alcohol Testing Consent:

I have fully read and understand the Drug and Alcohol policies of East Central College, the MHPC community partner college, and those of the Respiratory Care Program as stated in this consent. I understand that all drug/alcohol screening tests will be used for the sole purpose of determining my ability to enter client care areas as needed for me to complete the clinical requirements of the MHPC Respiratory Care Program. I hereby consent to be tested at a site determined by the MHPC RCP Program.

Full Name (Print): _____ Date of Birth: _____

Address: _____
Street Address City State Zip code

Signature: _____ Date: _____

# Respiratory Care Program

# Medical Marijuana Policy

As of December 2018, when voters approved a statewide ballot measure, Article XIV of the Missouri Constitution now allows for the possession and cultivation of marijuana for medical use. Under the program developed by the Missouri Department of Health and Senior Services, Missouri physicians may certify that their clients are eligible for medical marijuana use. Clients who receive certification must then apply for an identification card authorizing their use of medical marijuana.

Please note, ***marijuana is still illegal at the federal level***. Regardless of whether medical marijuana is legal in Missouri, federal law requires that colleges and universities adopt and enforce drug-free workplace policies, as well as programs to prevent the unlawful possession, use, or distribution of illicit drugs by students and employees. Accordingly, because marijuana is still considered illegal under federal law as a "Schedule I" drug, ***the MHPC Respiratory Care Program must prohibit its distribution, possession, and consumption on property owned and operated by the East Central College or its affiliates (clinical partner affiliations & MHPC community college partners).***

Students and employees who are found in possession or under the influence of marijuana will be subject to disciplinary action in keeping with the college's policies and procedures. Please be advised that disability accommodation is not available for medical marijuana use. Students are encouraged to seek assistance with Access services for options related to alternative accommodations. If the authorized use of marijuana for medical purposes while off-campus impairs a student or results in student conduct violations, it may result in disciplinary consequences from the Program and/or college.

CBD oils, supplements, and products derived from hemp are legal under both federal and Missouri law. Individuals are cautioned to use these products at their own risk. ***These types of supplements may still be detected in small amounts or types and can result in a positive drug screen (AJN, 2/2021).***

Full Name (Print): _____

Signature: _____ Date: _____