



2021-2022

# EMS Student Clinical Program Handbook

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# ACERIP Student Clinical Requirements

## Pre-Clinical Requirements

### Pre-Clinical Documentation

All pre-clinical documentation as noted on ACERIP.org MUST be completed and uploaded to Castlebranch prior to commencing clinical shifts.

**Compliance (these are assigned under online assignments and do not need to be uploaded to Castlebranch )**

- UNCMC Core Orientation
- UNC Statewide Core Orientation
- UNC Mandatory Compliance Training for Non-Employees

### Clinical Site Specific Documentation

Some clinical sites have specific documentation requirements. These forms are available for download at acerip.org Sites may require that these forms be signed at the clinical site.

## Clinical Experience Objectives

To prepare competent entry level Emergency Medical Technicians in the cognitive, psychomotor (skills) and affective learning domains by:

1. Conducting patient assessments to determine chief complaints, formulate field impressions and provide appropriate treatment
2. Demonstrating a range of skills learned during the didactic portion of the program
3. Demonstrating appropriate interactions (respect and compassion) and interviewing skills with patients, family members and other healthcare providers.



## Clinical Requirements

To meet NCOEMS standards, students must complete a minimum of 48 hours of clinical time and obtain a minimum of 10 patient assessments. In the event that 10 assessments are not obtainable during 4 shifts, due to inadequate number of calls, severity of the patients or other circumstances, students will need to schedule additional shifts until they have 10 patient contacts.

Students are also expected to demonstrate competency in all EMS skills executed in the field. Competency on each of the skills demonstrated will be documented by the preceptor at the end of the shift. Any skills which “require improvement” will need to be demonstrated on an alternate shift or in class.

Students are expected to prepare 4 radio call-ins as part of their clinical experience. If possible, the student should attempt one live radio call-in to the hospital. The 4 radio call-ins should be practiced with a preceptor and documented during clinical shifts. Radio call-in documentation should be uploaded with patient assessment documentation. If there are insufficient patient transports, radio call-ins may be written for any patient as though they had been transported. Students may take and use a call-in template to aid in this process.

## Field Clinical Information and Policies

### Uniforms

Students are required to dress appropriately. Students who arrive at clinical sites that are not in appropriate uniform may be sent home and counted as absent for their clinical ride time. No student will be rescheduled if they are sent home by an EMS agency.

- EMS Student Polo
- Navy or black pants (preferably EMS pants) (NO jeans)
- Black or brown closed-toe shoes or boots (no sneakers)
- Black or brown belt
- Optional solid navy or black coat (jackets may not have any large logos or any items that represent another agency or entity).
- Ink pen, notepad and watch with a second hand
- **No** perfume, cologne, or after-shave; mirrored or “day glo” colored sunglasses; facial jewelry, dangling necklaces, bracelets or dangling earrings permitted



## Clinical Schedules and Assignments

Field clinical experiences are arranged by the Clinical Coordinator. Shifts are 12-24 hours in length with start and finish times dependent upon the particular clinical agency policy. Students must complete the entire shift. Students should be prepared to stay late in the event that an emergency call runs later than the scheduled end time of the shift.

Shifts are available during the week and weekends. Specific hours (day/night shifts) are available contingent upon the field clinical location policy. Students may NOT schedule shifts on in-person or synchronous class days.

Each student must report to the assigned clinical location 10-15 minutes prior to the scheduled starting time (but no earlier than 15 minutes), in proper attire, and be prepared to participate in patient care. It is the responsibility of the student to maintain clinical documentation forms and have them signed by their clinical instructor or preceptor. **Signed forms documenting completion of the clinical shift must be electronically submitted within 72 hours following the shift.**

## Clinical Shift Sign-up

Students will be given multiple opportunities to select desired shifts. Shifts are NOT guaranteed until the clinical site returns approval for the request and the student is notified that the shift is APPROVED. Once a student has signed up for a shift, the shift request **CANNOT BE CHANGED**. Students should select shifts accordingly. A student who realizes that they signed up for a shift that they cannot attend will lose the scheduled attendance hours and will be rescheduled as last priority.

After the initial sign-up, additional sign-up opportunities will specify available sites and dates. **Requests for shifts for a site not indicated or a request outside of the date ranges specified in the sign-up announcements will be deleted and students will NOT be notified.** It is the student's responsibility to READ the sign-up requirements and request shifts accordingly. Do NOT sign up for shifts unless a shift request announcement has been posted. Due to limited availability, students MAY NOT sign up for more than 1 ED shift. **NO LAST MINUTE SHIFT REQUESTS WILL BE CONSIDERED FOR FAILURE TO FOLLOW INSTRUCTIONS!**

Students who fail to obtain their required shifts prior to the clinical extension period deadline will fail the class for inability to complete the clinical component.

Students will be notified no later than 24 hours in advance of approval for their clinical.



In the event that a requested shift is not approved by the clinical site, the student will be given an opportunity to select another shift.

### **Clinical Attendance Policy**

Students are expected to attend their scheduled shift. If, on the day of the shift, an unforeseen event (e.g. illness) necessitates absence from the shift, students must immediately notify the clinical site and the Clinical Coordinator prior to the start time. Students will be docked 12 hours for unexcused absences or no shows and will be rescheduled on a lower priority basis.

### **Clinical Supervision**

During clinical shifts, the student is directly accountable to the provider(s) in charge of their activities. The student must have adequate supervision at all times. Students should actively engage in patient assessment and care according to their scope of practice. Students are encouraged to express interest in learning during down time and show initiative when on calls. All psychomotor skills shall be carried out under the direct supervision of a clinical preceptor. Preceptors will determine if the condition of the patient is conducive to or prohibitive of skill performance by the student. **If a student is asked to perform procedures for which no instruction or practice has been obtained or which is outside the student's scope of practice level, it is the student's responsibility to advise the preceptor.**

### **Professional Behavior**

Students are expected to present a professional appearance and to demonstrate professional behavior at all times. All clinical personnel and patients are to be treated with respect. Cell phones must remain on silent during all EMS calls and no phone calls shall be answered or texting conducted while on an EMS call. Cell phones will NOT be used as "watches" for obtaining vital signs.

### **Personal Protective Equipment**

Students are expected to follow all safety precautions during shift. This includes wearing appropriate PPE on scene. Gloves, eye wear, masks and/or gowns will be provided by the clinical site. (Revisions/additions to this policy may be necessary during the COVID pandemic). Students will wear seat belts while riding in emergency vehicles and safety vests while on-scene at any roadside or traffic-related incidents. Students **will not** actively participate in extrication procedures involving power equipment. Under **NO circumstances** is a student allowed to operate any EMS vehicle. Students are required to follow all safety-related instructions of clinical agency personnel.



## **Breaks and Meals**

Students are expected to use their clinical shift time to learn about EMS and perform skills as appropriate. Field preceptors are often willing to demonstrate equipment and offer other EMS guidance during non-call time. Students should demonstrate interest in obtaining as much information as possible. Breaks and meals during field shifts are subject to the variable nature of EMS calls. Students should plan to bring food with them to refrigerate or prepare at the site. In many cases, the EMS crews will stop to pick up food or go out to eat. Regardless of whether students have brought food, they must remain with their crew at all times.

Often, there is substantial down-time during field shifts. Students may bring computers and/or reading material for these periods. It is recommended that students use this time to focus on EMS related material.

## **Media Policy**

Taking photographs at any EMS scene is **strictly prohibited**. This includes pictures of patients, EMS personnel, emergency vehicles, and/or private vehicles. Posting information on social media sites regarding any EMS calls or events is also prohibited. Any student found to be in violation of this policy will be dismissed from the ACERIP EMS program.

## **HIPAA**

HIPAA requires that all students adhere to the privacy requirements both during their program and after the conclusion of the EMS program. Under HIPAA, students are considered “employees” of the sponsoring clinical site and must adhere to all site policies and procedures. Patient identifying information obtained during clinical rides is NOT to be disclosed either verbally or in any written or electronic form. Clinical documentation should NOT include patient names, addresses or any other identifying information other than sex and age.

## **Transportation and Parking**

Transportation to clinical sites is the student’s responsibility. Students must comply with clinical site rules and regulations regarding parking. Shift locations are noted on the clinical sign-up pages. **DO NOT contact clinical sites for directions!** When arriving at the shift location, entrance doors may be locked. Students should wait until they see someone come in or out. **Under no circumstances should students bang on the**



**door.** Many stations house both EMS and Fire personnel with different shift change times. Night shift personnel may still be asleep.

### **Chemical Impairment**

Students have a professional and ethical responsibility to be free from chemical impairment during all clinical shifts. The chemically impaired student is defined as a person under the influence of, either separately or in combination: alcohol, illegal drugs, prescribed or over-the-counter medications, synthetic designer drugs or inhalants. Students should refrain from drinking alcohol for a minimum of 12 hours prior to the start of a clinical shift.

### **Harassment Policy**

The ACERIP EMS Program takes professional and ethical responsibility for providing an environment in which all students are treated with courtesy, respect, and dignity in all aspects of the program including classroom and field settings. Any actions, by any persons, which constitute sexual harassment or harassment in any form, will not be tolerated. Any individual who witnesses and/or has a complaint of harassment should report the incident promptly to the Lead Instructor(s) /Program Director. Individuals will not be retaliated against for complaining of harassment. Concerns will be appropriately addressed and resolved.

### **Student Injury/Exposure**

ACERIP is dedicated to ensuring that all students are trained and educated on matters related to safety and prevention of occupational injury and exposure. All students receive Blood Borne Pathogen training to ensure appropriate awareness of the risks of exposure and proper use of personal protective equipment. Students should read and be familiar with The *Student Injury/Exposure Policy and Procedure* in the unlikely event of an injury or exposure. Students are required to show Proof of Health Insurance as a requirement for participating in the clinical program since they will be responsible for any health care costs associated with an injury or exposure incident. The Student Professional Liability Insurance does not cover costs associated with these incidents.

**(See following page for the Student Injury/Exposure Policy and Procedure)**





## Student Injury/Exposure Policy and Procedure

### Exposure

In the event that a student should have an exposure to an infectious material as defined by OSHA while participating in a field clinical, the student should **notify their preceptor immediately**. After notifying the preceptor, the student should seek medical care at the facility to which the patient is transported or at another appropriate medical facility.

Upon arrival at the facility, the student should notify the triage nurse during patient check-in. Students should follow all instructions of hospital personnel for appropriate care and follow-up. **Students will be responsible for all health care costs associated with initial and follow-up care for an exposure.** ACERIP is not responsible for exposure incident occurrences or post-exposure care.

The student should notify the ACERIP Lead Instructor(s) or ACERIP Program Director as soon as practicable but no later than 24 hours following the exposure. They will assist the clinical site in any required exposure reporting.

Students should complete any agency required incident report forms and submit a copy to the ACERIP Program Director no later than 24 hours following the incident.

### Injury

In the event that a student should be injured when at a clinical site, the student should notify the preceptor immediately. After notifying the preceptor the student should seek medical care at an appropriate medical facility. The student should notify the ACERIP Program Director as soon as possible. If required by the agency, students should complete an Incident Report and provide a copy to the ACERIP Program Director within 24 hours following the incident.

Students will be responsible for all health care costs associated with a personal injury to themselves.



## Clinical Documentation Instructions

### Clinical Shifts

- **Print and bring copies** of the following documents to each shift:
  1. Clinical Skills Competency Evaluation (1 copy); get signed by preceptor at end of shift
  2. Field Performance Evaluation (Minimum 2 copies which covers 10 patient contacts); each copy including evaluation for each patient contact must be signed by preceptor at end of shift
  3. Site/Preceptor Evaluation (1 copy): **no signature** required
  4. Patient Care Report (10 copies): review with preceptor; **no signature** required
  5. Radio Call-In Reports (4 copies): review with preceptor; **no signature** required
- **Review** all documents prior to your shift and be familiar with the objectives and criteria
- **Attend EMS shift**
  - Review documentation, objectives and criteria for evaluation with preceptor at beginning of shift
  - Show preceptor the skills that you are able to perform from the Clinical Skills Competency Evaluation form
  - Student should complete form #1 (**Clinical Skills Competency Evaluation**) after each call and have preceptor complete evaluation and sign at end of shift
  - Student and preceptor should complete Form #2 (**Field Performance Evaluation**) after each call; Preceptor should sign at end of shift.
- **Completing Documentation**
  - Complete the student sections of the evaluation forms **AFTER** each call. Do NOT wait until the end of the shift to begin completing documentation. Have the primary preceptor complete the Field Performance Evaluation section for each call when the call is completed. At the end of the shift, have the preceptor who observed skills complete the Clinical Skills Competency Evaluation.
  - Evaluations #1 and #2 **MUST** be signed by the preceptor. Any forms submitted without signature will NOT be counted toward the clinical requirement. Students who forget to obtain signatures **MAY NOT EMAIL OR VISIT THE SITE TO OBTAIN SIGNATURES** after the shift is completed.
- **Upload** all evaluation forms, patient care reports, and radio call-ins to the ACERIP website (NOT Sakai) within 72 hours of completing your shift

***(Clinical forms may be downloaded from the ACERIP.org website.)***



## **Clinical Documentation Rules**

Clinical documentation is an important part of becoming a competent EMT. You should treat your documentation as though you were uploading it to a real EMS agency. As such, errors in documentation are unacceptable. It is your responsibility to ensure that each document is completely filled out, files are properly named and all required shift documents are uploaded simultaneously.

The following is a checklist for proper documentation completion.

### **Evaluation Forms**

- Performance evaluations must have ALL columns filled out (patient age/gender, chief complaint, differential diagnoses, treatment, medications, trauma mgmt, assessments)
- Skills evaluation and performance evaluation are signed by preceptor
- Student name and date is on all forms
- 1 PCR is completed for every patient on performance evaluation

### **PCRs and Radio Calls**

- Chief complaint on PCR/radio call matches chief complaint on performance evaluation
- Must complete all parts of PCR including past medical history, medications and vitals (must write NA if not available)
- PCR must follow CHARTE format
- PCR must include patient information, age, and type of call in header
- Must submit 10 PCRs total which are completely filled out, including vitals, medications, past medical history and treatments. Medications administered must be fully documented including the name of the drug, dose, route, time of administration and patient response.
- The narrative portion of the PCR must meet a minimum standard of excellence as practiced during class assignments. This includes how and where the patient is found on arrival, chief complaint, mental status, A,B,C evaluation; physical findings, and SAMPLE hx. Vitals may be documented in the appropriate boxes. The narrative must also include how the patient was moved to the ambulance, any reassessment or treatment findings during transport; destination hospital; level of transport urgency; and patient condition on arrival. Document to whom the patient was turned over to at the hospital.
- Radio call must follow outline provided
- Radio call must include patient information, age, and type of call in header
- Must submit 4 radio calls total

### **Uploading Clinical Documentation**

- Must submit all documents within 72 hours of shift
- Must include your name in the name field when uploading
- Must upload via ACERIP website



**Incorrect documentation submissions will be deleted and you will receive a REJECT notification. It will be your responsibility to figure out what is wrong. You must correct and re-upload ALL documents for the shift within 72 hours to receive credit for the shift.**

## ACERIP Clinical Strike Policy

The following actions will result in a strike against your clinical record:

- Signing up for a shift outside the acceptable date ranges as posted
- Signing up for a shift at an agency not specifically designated as accepting shifts
- Signing up for more than one ED shift without prior authorization
- Any rejection email received for improper documentation
- Not submitting docs within 72 hrs after shift
- Not correcting docs within 72 hrs of rejection notification
- Disruptive behavior at clinical site, including knocking on doors calling the site to be let in
- Calling the clinical site for any reason other than to notify of absence
- Late to shift
- Excessively early (>15 min) to shift
- Theft of agency property will result in immediate dismissal and program failure

**It is your responsibility to completely read all instructions provided in the Student Handbook, on the ACERIP website and in announcements posted on Sakai.**

**It is your responsibility to submit complete and error free documentation as would be expected of you as an employee of any EMS service.**

You will get three (3) strikes. After the third strike you will **FAIL** the clinical portion of the class.