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Student Handbook of Policies and Procedures

Ray Healthcare Academy STUDENT POLICIES AND PROCEDURES



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PROGRAM DIRECTOR STATEMENT

Ray Healthcare Academy has a mission to empower and educate individuals to serve as a valued

member of the healthcare team. We understand the passion, motivation, and desire to help others

in emergency situations and are privileged to share our knowledge with our students and our

community.

Our Academy serves as the entry point into the healthcare and business world. We utilize the

best curriculum, instructors, preceptors, and methods to ensure student success throughout our

program. It is our desire that every graduate of the Ray Healthcare Academy continue their

education and become licensed personnel in Emergency Medical Services and other healthcare

disciplines. Together, we can change EMS, healthcare, and the world.

Welcome to the Team!

Shirlinda Savahl, LP, BS

Executive Director, Ray HCA

The information contained in this catalog is accurate as of this date.

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Date: January 25, 2021

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HOURS OF OPERATION

Office hours: Monday – Thursday, 9:00am - 4:00pm (0900-1600)

Program hours: Sunday – Saturday, 8:00am - 10:00pm (0800-2200)

HOLIDAYS AND VACATIONS

New Year's Day

Memorial Day

Independence Day

Labor Day

Thanksgiving (Thursday and Friday)

Christmas Holiday Break (December 24 & December 25)

MISSION

To empower, educate and prepare individuals to serve as a valued member of a healthcare team.

PHILOSOPHY

At Ray Healthcare Academy, we know our students are the future of healthcare. Empowering them to become excellent members of the healthcare team and encouraging them to continue their education ensures high quality healthcare service for future generations.

Each faculty, staff and advisory council member understands our mission and philosophy.

All representatives of Ray HCA are community members who understand that students are the reason for our Academy and healthcare is a dynamic, engaging, demanding profession. We will do our best to help you excel in your career!

PURPOSE

The purpose of the Academy is to encourage community members to become students. Students are guided through the program and, upon successful completion, offered competitive job placement opportunities by our community business partners. Continuing education opportunities ensure quality education is available throughout the career of the graduate.

EDUCATION AND OCCUPATIONAL OBJECTIVES

To recruit and train professional faculty who are knowledgeable and current within their respective fields to ensure the best training for Ray HCA students.

To enhance professional development and training for faculty and staff by offering CE and leadership opportunities.

To update our curriculum based on national standards and industry specific expectations.

To provide extrinsic motivation and encourage intrinsic motivation to learn and understand the skills that ensure a productive and successful career.

To develop and maintain partnerships with community businesses for the purpose of employment opportunities for our graduates.

To consistently evaluate our program through feedback from students, graduates, employers, faculty, and staff to measure satisfaction and quality of our program.

VALUE OF CERTIFICATION

A certification as a Healthcare Provider (of any level) indicates the ability to successfully complete a rigorous college level course. Employers are seeking motivated individuals with specialized skills for immediate employment.

Employers hire certified individuals at a higher rate than noncertified individuals. Unemployment rates are significantly less for certified persons (www.bls.gov, 2018). Certifications can be validated due to standardized curriculum and the ability to obtain a

nationally recognized certification or license through computer-based testing at nationally recognized centers. Ray Healthcare Academy ensures credibility and a positive reputation in a competitive market. Certifications issued by Ray Healthcare Academy are valued in the workforce due to the training our students receive and the highly competent and qualified healthcare providers we produce.

APPROVALS

- Ray Healthcare Academy is certified by the Texas Department of State Health Services as a Basic EMS Education Program. Program #pending.
- American Heart Association (AHA) Training Site: Basic Life Support (BLS), Advanced Cardiac Life Support (ACLS), Pediatric Advanced Life Support (PALS), AHA Instructor classes (as PBCPR, LLC)
- National Association of Emergency Medical Technicians (NAEMT) Training Center: Pre-Hospital Trauma Life Support (PHTLS), Geriatric Education for EMS (GEMS), Pediatric Emergency Care (EPC), EMS Safety; AMLS pending (as PBCPR, LLC)
- Health and Safety Academy (HSI) Training Center: Medic First Aid and American Safety and Health CPR/AED/First Aid, Wilderness First Aid, ACLS, PALS, BLS (as PBCPR, LLC)
- American Red Cross Training Center: Professional Rescuer, CPR/AED/First Aid, Babysitter (as PBCPR, LLC)
- Texas Commission on Law Enforcement (TCOLE) Training Center: All classes approved for TCOLE certification by Texas Peace Officers

NON-IMMIGRANTS

This school is authorized under Federal Law to enroll non-immigrant students.

HISTORY

Ray Healthcare Academy was certified as a Professional Limited Liability Corporation in the State of Texas in January of 2021. Ray HCA is the next step in the mission of Permian Basin CPR, LLC to provide quality healthcare education to the citizens of our community. PBCPR has operated in Texas since 2011. Shirlinda Savahl founded the company in Tennessee in 1998 (then called LifeSavers CPR) which provided AHA classes to individuals and businesses. A West Texas native, Shirlinda returned to Midland to care for family. The move back to her hometown necessitated a business name change, but the mission and purpose remained consistent.

Married to Sharief Savahl in 1998, the two have taught thousands of classes and certified multiple thousands of individuals over the years. Their three children are all competent providers who were trained as instructors at the appropriate age.

Sharief and Shirlinda met while working as Emergency Medical Technicians for an EMS provider. Shirlinda continued her EMS education while Sharief pursued a career as a Peace Officer, while maintaining his EMT certification. Shirlinda now holds an Associate of Applied Science in EMS and a Bachelor of Science in Multidisciplinary Studies (Behavioral and Natural Sciences). Her Master of Education with a focus on Leadership will be complete in 2021. Shirlinda's passion for quality adult education provided in an environment which utilizes a heutagogical approach was the motivation to open Ray Healthcare Academy.

Named after an instructor, friend, colleague and benefactor, Ray Healthcare Academy strives to provide quality healthcare certification training to individuals. Dennis Ray McCampbell is an active faculty member of Ray Healthcare Academy and a dedicated Texas Firefighter and Paramedic. His commitment to the profession is celebrated in our name and our mission.

As the sister company to Permian Basin CPR, Ray Healthcare Academy benefits from the exceptional reputation and ten years of community involvement PBCPR has provided to West Texas. With this collaboration, all equipment, supplies and facilities currently owned by PBCPR are available for use by Ray Healthcare Academy. An inventory plan is in progress to separate the pertinent supplies for tax purposes.

FACILITIES

Ray Healthcare Academy occupies a 2,500 square-foot building with classrooms, lobby, reception area, skills lab, and kitchen. Resource materials are available to all students during hours of operation. There is ample parking surrounding the building, including street parking, alley parking and adjacent lots.

NON-DISCRIMINATION POLICY AND AFFIRMATIVE ACTION

The school requires that all admission and hiring practices are structured and applied equally without regard to factors that are non-job related. This commits the school to provide equal admission and hiring opportunity to all phases of student and employee recruitment, training, and placement.

Ray Healthcare Academy admits students without regard to race, color, creed, sex, age, handicap, sexual preference, medical problems, national or ethnic origin to all programs and activities generally afforded or made available to the students at the center.

It does not discriminate on the basis of race, color, creed, sex, age, handicap, sexual preference, medical problems, national or ethnic origin in the administration of its educational policies, admissions policies, scholarships and financial programs, employment policies and other school administered programs.

ADMISSIONS REQUIREMENTS

The admission requirements for the programs we offer are approved and regulated by the Texas Department of State Health Services (DSHS) and other governing and licensing agencies. These requirements are designed and intended to protect both the student and the public.

All requirements below must be met by each applicant:

• Be at least 17 years of age (applicants under the age of 18 require written permission from a parent or legal guardian to enroll and a parent or legal guardian must sign the enrollment agreement)

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- Present proof of secondary education (high school diploma or GED certificate or present enrollment with satisfactory academic scores)
- Review of criminal background
- Testing for controlled and illegal substances
- Health insurance coverage
- Show proof of Antibody response titers for and/or evidence of immunizations for all required series:
 - o MMR
 - o TB
 - o HepB
 - o Varicella
 - o Tetanus, diphtheria, and pertussis
- Seasonal Flu Vaccine may be required by clinical sites.
- Other requirements as requested by clinical sites.

Other In-School Requirements

Minors must obtain written permission from parents/ legal guardian and/or a school official. Students must attain the age of 18 in order to take certification examinations through the National Registry of EMT's and to be certified by the State of Texas. Other licensing agencies may have different requirements.

Students must successfully pass a criminal background check and drug test as determined by Ray HCA and clinical sites.

The AHA Basic Life Support for Healthcare Providers certification card is required for participation in clinical rotations. BLS Provider is offered by Ray HCA at no cost to enrolled students. All initial healthcare provider students are required to successfully pass this classroom course. Students in other disciplines may present a valid card for consideration.

Students are required to maintain a current BLS card on a two-year renewal cycle to comply with affiliating agency requirements. Renewal classes are provided by Ray HCA at no cost to enrolled students in good standing.

CRIMINAL HISTORY

Emergency Medical Services Rule 157.44 was written to establish guidelines and criteria on the eligibility of persons with criminal backgrounds to be certified as emergency medical services personnel. Texas Civil Statutes, Article 6252-13c. Section

(b) (c) states, "a certifying authority may disqualify a person from receiving a certification or deny a person the opportunity to be examined for a certification because of a person's conviction of a felony or misdemeanor, if the crime directly relates to the duties and responsibilities of the licensed occupation."

Admission to the program does not guarantee eligibility for state EMS certification, as program personnel are unable to make any determinations as to a potential candidate's eligibility. Criminal background checks are part of the screening process conducted by the Texas Department of State Health Services (TDSHS) and the National Registry (NREMT). As a result, some candidates with concerns about their background should complete a prescreening with the Texas DSHS. The Petition for EMS Criminal History Pre-Screening form and the Texas Fingerprint Service Code form are available at:

www.dshs.state.tx.us/emstraumasystems/formsresources.shtm.

Information about other licensing agencies is available by contacting:

Admissions@RayHCA.com

GENERAL SAFETY

Because of the nature of the healthcare profession, during their education students may be exposed to infectious or potentially infectious disease processes of a contagious nature; high-risk toxic substances; and/or other situations involving personal danger and the risk of serious injury or death. As a condition of enrollment in Ray HCA courses, students agree to abide by the terms of all program policies pertaining to safety.

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Faculty, staff, and preceptors are responsible for the health and safety of their students. They will ensure that students comply with prescribed protocols, safety regulations, and work practices. They will investigate all hazards of which they become aware and take appropriate corrective action. Students will abide by all instructions provided by faculty, staff, preceptors, and clinical/field internship site personnel. Students will report unsafe or unhealthy conditions to their instructors or preceptors. Repeated or flagrant disregard of safety policies, rules, or precautions may result in dismissal from the program without refund.

AMERICANS WITH DISABILITIES ACT—ALLOWABLE ACCOMMODATIONS

The Americans with Disabilities Act (ADA) of 1990 has implications that pertain to licensure or certification. The law permits testing that requires the use of sensory, manual, or speaking skills where the tests are intended to measure essential functions of the profession. For example, an applicant with reading difficulties is required to take a written exam since the ability to read is an essential function of healthcare providers. Exams are designed at least in part to measure the student's ability to read.

A second example is dealing with skills proficiency verifications that must be performed within established time frames. Performing a skill within established time frames is required because speed and accuracy of performance is an integral part of patient care.

Both the ability to read and the ability to perform skills within time frames are essential functions for a healthcare provider. Therefore, in EMS and other professions, a person with a disability may not be denied the opportunity to take an examination, but this person shall be required to take a written exam and pass the skills proficiency verifications within established criteria.

DISABILITY SERVICES

Ray Healthcare Academy will take the steps required for reasonable accommodation to ensure that no individual is excluded, denied service, segregated, or otherwise treated differently than

other individuals because of the absence of auxiliary aids and services. Support assistance may include note takers, interpreters for the deaf, tutoring, counseling, and advising, special arrangements for testing, tape recorders, etc. Persons requesting disability services should complete a request for services by contacting Admissions personnel or the Program Director. In some cases, documentation of disability may be required.

The National Registry of Emergency Medical Technicians administers a separate process from the one used by Ray Healthcare Academy for determining whether accommodations for disabilities will be granted during certification examinations. The National Registry establishes reasonable accommodations for disabilities on a case-by-case basis. Therefore, a student who receives an accommodation during a course has no guarantee of receiving an accommodation for the National Registry's certification exam.

Information about other reasonable accommodations for other licensing agencies is available by contacting: Admissions@RayHCA.com

OTHER NON-DISCRIMINATORY POLICIES

The Functional Job Description produced by the Texas Department of State Health Services (DSHS), outlined at the end of this section, describes the required skills and job requirements essential to EMS personnel. This description will guide all accommodations permitted for the EMT and other healthcare students. Case specific information is available by contacting: Admissions@RayHCA.com

The following specific points pertain to those involved in healthcare training and education programs:

Students cannot be discriminated against on the basis of a disability in the offering of educational programs or services.

There can be no accommodation during screening, evaluation or course examinations that will compromise or fundamentally alter the evaluation of skills that are required to function safely and efficiently in the profession.

The National Registry of Emergency Medical Technicians administers a separate process from the one used by Ray Healthcare Academy for determining whether accommodations for

disabilities will be granted during certification examinations. The National Registry establishes reasonable accommodations for disabilities on a case-by-case basis. Therefore, a student who receives an accommodation during a course has no guarantee of receiving an accommodation for the National Registry's certification exam.

Information about other reasonable accommodations for other licensing agencies is available by contacting: Admissions@RayHCA.com

The following accommodations are not allowed in the EMS or other healthcare provider training because they are not in compliance with the essential job functions of an EMT or other healthcare provider as outlined in the Functional Job Description. These include, but are not limited to:

- Students are not allowed additional time for skills with specific time frames.
 - o Excellent patient care demands speed and accuracy in an emergency.
- Students are not allowed unlimited time to complete a written exam.
 - o This request is not considered reasonable because a candidate should be able to complete a test within a finite amount of time.
- Students will be allowed a maximum of time and one-half to complete written exams.
 - o For example, students may be allowed 90 minutes for a 60-minute test.
- Students are not allowed to have written exams given by an oral reader.
 - The ability to read and understand small English print is an essential function of the profession, and written exams are designed, at least in part, to measure that ability.
- Students are not provided a written exam with a reading level of less than grade eight.
 - Healthcare professions require a reading level of at least grade eight to work safely and efficiently.
- Students must take all exams during the scheduled time, as a member of the enrolled class.
 - o Refer to the written examination policy of missed exams due to excused absences.

- Students must answer all written test questions as written. No explanation of the question can be provided by the test proctor or any other individual during the test.
 - O Additional descriptions of test questions would not be a reasonable accommodation because reading and understanding written English is an essential part of communication.
- Student must be able to understand and converse in medical terms appropriate to the profession.
 - o Medical terminology is provided at the beginning of every Ray Healthcare Academy course.

Due to the critical nature of the tasks needed in emergency situations, accommodation requests are carefully and individually considered. The safety and welfare of the community must be ensured while providing full protection of the rights of the applicant. All requests will be considered by no less than three faculty members, including the program director with the following questions used in the process: Can this individual perform the essential functions of the job safely and efficiently with the requested accommodation? Is the accommodation available outside the classroom or precepted clinical setting?

FUNCTIONAL POSITION DESCRIPTION for EMS Students (other descriptions available upon request)

ECA / EMT / AEMT / PARAMEDIC

Introduction

The following general position description for the ECA, EMT, AEMT and Paramedic is provided as a guide for advising those interested in understanding the qualifications, competencies and tasks required for emergency medical services certification. It is the ultimate responsibility of an employer to define specific job descriptions within each Emergency Medical Services (EMS) entity.

Qualifications

To qualify for EMS certification or licensure an individual must successfully complete a State approved course and achieve competency in each of the psychomotor skills. In addition, the individual must achieve a passing score on the state written certification or licensure examination. Certified EMS personnel must be at least 18 years of age. Generally, the knowledge and skills required show the need for a high school education or equivalent. EMS personnel must have the:

Ability to communicate verbally via telephone and radio equipment.

Ability to lift, carry and balance up to 125 pounds (250 pounds with assistance).

Ability to interpret written, oral, and diagnostic form instructions.

Ability to use good judgment and remain calm in high-stress situations.

Ability to work effectively in an environment with loud noises and flashing lights.

Ability to function efficiently throughout an entire work shift.

Ability to calculate weight and volume ratios and read small print, both under life threatening time constraints.

Ability to read and understand English language manuals and road maps.

Ability to accurately discern street signs and address numbers; ability to interview patient, family members and bystanders.

Ability to document, in writing, all relevant information in prescribed format in light of legal ramifications of such.

Ability to converse in English with coworkers and hospital staff as to status of patient.

EMS personnel should possess good manual dexterity, with ability to perform all tasks related to highest quality patient care. Ability to bend, stoop and crawl on uneven terrain and ability to withstand varied environmental conditions such as extreme heat, cold and moisture is vital. The ability to work in low light, confined spaces and other dangerous environments is required.

Description of Tasks:

Receives call from dispatcher, responds appropriately to emergency calls, reads maps, may drive ambulance to emergency site, uses most expeditious route and observes traffic ordinances and regulations.

Determines nature and extent of illness or injury, takes pulse, blood pressure, visually observes changes in skin color, auscultates breath sounds, makes determination regarding patient status, establishes priority for emergency care, renders appropriate emergency care (based on competency level); may administer intravenous drugs or fluid replacement as directed by physician.

May use equipment and initiate patient care (based on competency level) including, but not limited to, AED/defibrillator/monitor, endotracheal intubation, ventilation, compressions, initiate IV fluids and medication administration to improve patient's blood circulation or stabilize injuries.

Assists in lifting, carrying, and transporting patient to ambulance and transports to a medical facility.

Reassures patients and bystanders, avoids mishandling patient with undue haste, searches for medical identification emblem to aid in care.

Extricates patient from entrapment, assesses extent of injury, uses prescribed techniques and appliances, requests additional assistance or services, provides rescue service if required, provides additional emergency care following established protocols.

Complies with regulations in handling deceased, notifies authorities, arranges for protection of property and evidence at scene.

Determines appropriate facility to which patient will be transported, reports nature and extent of injuries or illness to the facility, asks for direction from hospital physician or emergency department.

Observes patient en route and administers care as directed by physician or emergency department or according to published protocol.

Identifies diagnostic signs that require communication with facility.

Moves the patient into the emergency facility from the ambulance.

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Reports verbally and in writing concerning observations about the patient, patient care at the scene and en route to facility, aids emergency staff as required.

Maintains familiarity with all specialized equipment.

Replaces supplies, sends used supplies for sterilization or disposal, checks all equipment for future readiness, maintains ambulance in operable condition, ensures ambulance cleanliness and orderliness of equipment and supplies, decontaminates vehicle interior, determines vehicle readiness by checking oil, fuel, water in battery and radiator and tire pressure.

CREDIT TRANSFER

Ray HCA does not offer credit for any incoming students who might have taken similar courses at another institution.

EQUIVALENCY PROGRAM

Ray HCA does not offer equivalency programs for persons with other allied health education and/or licenses.

ACADEMIC TRANSCRIPTS

Ray HCA does not provide academic transcripts but awards a course completion certificate after successfully completing the program. Transferability of credits are limited and rests entirely on the decision of the receiving institution. There is no guarantee that credits earned at Ray HCA will be accepted anywhere else. A course syllabus is available by contacting Admissions@RayHCA.com

For students who wish to transfer credits elsewhere:

No representations are made whatsoever concerning the transferability of any credits to any institution. Students transferring to other institutions must not assume that the credits earned at Ray HCA will be accepted at another school or college.

ENROLLMENT/RECRUITMENT PROCEDURES

Application for admission may be made during normal business hours by applying in person at the Ray Healthcare Academy office; online via the website, RayHCA.com; or by scheduling an appointment with one of our admission representatives via phone or email, 432-688-7450 or Admissions@RayHCA.com.

Ray Healthcare Academy has an open-door admission policy, which means that students can be admitted if they have a high school diploma/GED, a Homeschool certificate recognized by the student's home state or are currently enrolled in a high school program. If the student received their education in another country, they must have their transcript evaluated by a foreign credentials evaluation service that attests to the equivalency. This evaluation is performed at the student's expense. (Texas Administrative Code, Title 25, Part 1, Chapter 157, Subchapter C, Rule §157.33)

Students under 18 must have a parent or legal guardian sign approval prior to admission.

Upon acceptance, the enrollee shall remit an enrollment fee to confirm enrollment and to ensure the applicant a place in the program. Current fees are described in the fee schedule.

All applicants must complete the required admissions documents and are encouraged to tour the campus prior to starting classes. The student's file will contain evidence that the admissions requirements were met.

Prior to enrollment, the Director will ensure that all enrollment policies and practices have been satisfied. Additionally, every student will complete an enrollment agreement. Ray Healthcare Academy will disclose all tuition, fees, and other charges to potential students, inform students of the charges associated with repeating a course or section, issue a written receipt to the student for charges and payments received and maintain copies on file.

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Payment

All receipts will identify the name of the payer, type of funding, and reason for charges.

Background checks, titers, immunizations, drug test, uniform, supplies, lab fees, and tools are not

included in the tuition expenses. Expenses vary, depending on the program.

Course Fees

Listed below are the approximate costs for all course-related expenditures. These prices are not

guaranteed, and the prices may change without notice. Every attempt is made to keep costs to a

minimum.

A student may apply funds paid for one class to another class if the student is in good standing

with the program. The cancellation policy below is used to determine the amount of transferable

funds. Ray Healthcare Academy allows students to make a down payment for the course and

receive funding from a third-party bank or financier. Payment in full is required before final

exams, course completion certificates or approval to test are issued.

FEE SCHEDULE

Emergency Medical Technician

EMT: \$1,950

The following items are included in the tuition:

E-Textbook

EMS Testing Program

Fisdap Clinical/Field Experience Tracking Application

Liability/Malpractice Insurance

Student Identification Badge

BLS Provider Initial course

National Registry First Time Testing Fee

One Ray HCA T-shirt

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The following items are not included in the tuition price and will be additional cost to the student: (prices may change due to market prices without prior notice)

Drug screening test – urine 10 panel - \$35-\$50 (depends on location)

Fingerprinting - \$39.75

EMS Uniform, includes Clinical Polo - \$40 - \$125 (depends on quality and quantity)

Hepatitis-B vaccine and all immunizations – up to \$300 (see local health department)

Stethoscope and B/P Cuff - \$20 - \$150 (depends on quality)

Holster kit: shears, bandage scissors, forceps, penlight, etc. - (optional)

State Application Fee \$64 (Paid with application to DSHS)

Replacement Student ID Badge: \$25

ACADEMIC REGULATIONS

Schedule

Classes are scheduled at various times from 8:00am to 10:00pm, Sunday through Saturday.

One clock hour is equal to 50 minutes of instruction with a 10-minute break.

Drop/Add

The student is responsible for officially dropping, in writing, any course that they no longer wish to attend and return their Ray HCA Student ID and any other school owned supplies or equipment.

If the student wishes to disenroll from their Ray HCA program, the student must request so in writing by email to Admissions@RayHCA.com. If the student wishes to continue in a future class, the student must complete the financial responsibility of the initial course and pay the appropriate transfer fee in order to enroll in a future class, see withdrawal section below.

CANCELLATION REFUND POLICY

An applicant who provides written notice of cancellation within three (3) business days, excluding weekends and holidays, of executing the enrollment agreement is entitled to a refund of all fee paid, excluding the \$100 non-refundable registration fee.

Rejection: An applicant rejected by the school is entitled to a refund of all monies paid.

Other Cancellations:

- An applicant requesting cancellation more than three (3) days after executing the enrollment agreement and making an initial payment, but prior to the first day of class is entitled to a refund of all monies paid, excluding the \$100 non-refundable registration fee.
- An applicant requesting cancellation more than seven (7) days but less than thirteen (13) days after the first day of class is entitled to a refund of all monies paid, excluding \$100 non-refundable registration fee and \$400 E-Textbook/Fisdap enrollment fee. Applicant may choose to withdraw and re-enroll at a later time. In this case, the E-Textbook/Fisdap enrollment fee may be credited to their next course.
- An applicant requesting cancellation fourteen (14) or more days after the first day of class is not entitled to a refund. Applicant may choose to withdraw and re-enroll at a later time. In this case, no amount of monies paid will be credited to their next course.

Course instruction time frame:	Amount of refund to student:
Prior to class start	100% of payment less \$100 registration fee
7 - 13 days after class start	100% of payment less \$500 fee
Fourteen or more days after class start	0% of payments

Withdrawal Procedure:

A student choosing to withdraw from the school after the commencement of classes is to
provide a written notice to the Director of the school via email or in person. The notice
must include the expected last date of attendance and be signed and dated by the student.

- An exit interview is advised prior to withdrawing. The exit interview will be used to determine the requirements for returning to the program at a later date.
- Students must officially drop the program through the Admissions Coordinator by emailing Admissions@RayHCA.com. Student will incur costs paid for all non-tuition expenses and tuition or fees per the cancellation policy above.
- If special circumstances arise, a student may request, in writing, a leave of absence, which should include the date the student anticipates the leave to begin and end. If the student fails to return to class on the designated date, the student will be considered withdrawn by default.
- A student will be determined to be withdrawn by default from the Academy if the student misses ten consecutive instructional days or 20% of the course and all of the days are unexcused.

A student withdrawn by default is liable for costs or monies due to their third-party lender or financier and the Academy per the cancellation policy above.

ATTENDANCE AND PARTICIPATION POLICY

Your attendance and active participation in class are integral components of your educational experience. Attendance and participation in all classes and labs are critical to your success. Every absence and late arrival represent a missed opportunity to learn. These missed opportunities may impact your success as a student and your career as a healthcare professional. Exam and quiz makeup policies are defined in the Program Progression and Course Grading section of this manual. Students are expected to attend each class meeting, skills lab and clinical for every course in which they are officially enrolled. The instructor of each course will provide the student with the course syllabus and policy manual that identifies the attendance requirements and a statement of the course objectives, including the grading criteria.

Absence

A full day absence will be recorded if the student does not attend any of the scheduled classes on that day.

If a student does miss a class, the student may be required to attend a make-up session, in coordination with the course instructor. If the student does not make up the missed day, then the absence is counted towards the total number of days missed. If the student exceeds the maximum amount of time missed, the student will be dismissed from the program.

Termination

A student attending Ray Healthcare Academy shall be terminated when the student is absent for ten (10) consecutive school days or 20% of the total program, whichever occurs first.

Successful implementation of this policy will require cooperation among all members including instructors, staff, and students.

Attendance is taken at the beginning and end of each scheduled class, skills lab or clinical day and documented by the instructor.

Absence/Tardy

Students are required to be in class on time. Failure to be on time will result in a student being marked absent. If a student arrives after the first ten (10) minutes, they will receive a tardy for that day. Three (3) tardiness will result in one absence from class. Students can miss no more than 20% of the total class time. Any student exceeding the total time allowed for absences will be dropped from the course.

The Academy does not differentiate between excused and unexcused absences and tardiness. Ray HCA programs are demanding healthcare courses. This accelerated format requires the student to be present and active in lecture and skills labs. This allows comprehension and reinforcement of the material and preparation for the NREMT and other licensing exams. Students with absences must coordinate with the instructor for options.

Student absence due to chronic health or extended medical problems (more than one week) must be documented by a physician's statement. These statements must be submitted to the Program Director. Upon receipt of these statements, tutoring will be arranged for students if required and requested.

Online students must log into Fisdap at least twice a week. Attendance will be recorded utilizing the student's response to the discussion board and time sensitive quizzes. Any missed discussion board responses or quizzes will be considered absent. Discussion board submission and quiz requirements will be outlined in the syllabus. Online students must also attend mandatory in class sessions. The above attendance policy will also apply to all online/hybrid students.

UNIFORM GRADING SYSTEM/POLICY

Ray Healthcare Academy has a uniform grading policy. The purpose of this policy is:

- To encourage students and faculty to create and sustain a positive learning environment.
- To create consistency of a grading policy across all academic units in the school system in those areas where such consistency is beneficial to students.
- To maintain faculty control over grading and the grading policy.

PROGRESS POLICY

The student's progress will be evaluated at the end of every section. Satisfactory progress is constituted by a minimum grade average of 75%.

Students who maintain a cumulative average of 75% or better will be considered in Good Standing.

Students who do not maintain a cumulative average of 75% will be placed on Academic Probation, as described below.

ACADEMIC PROBATION TERMS:

A student making unsatisfactory progress, falling under the minimum average of 75% for the program, will be placed on academic probation for the next progress evaluation period, not to exceed 30 days.

If a student is placed on academic probation, they will be counseled on the terms of such probation including: the date, transgression, action required, and terms of the probationary period and will be included in the student's permanent file per the Unsatisfactory Progress Form.

Students achieving a cumulative average of 75% or above at the end of the probationary period will be returned to good standing. If the student achieves satisfactory progress during the probationary period but does not achieve the required quiz or test grades to maintain 75%, the student will continue on academic probation for an additional progress evaluation period, not to exceed 30 days. Students who fail to achieve 75% at the end of two progress periods (not to exceed 45 days), will be dismissed from the program without a refund.

If a student on academic probation fails to achieve satisfactory progress for the first probationary progress evaluation period, the student's enrollment will be subject to dismissal.

The enrollment of a student who fails to achieve overall satisfactory progress for the program at the end of two successive probationary progress evaluation periods will be dismissed.

If a student is dismissed for unsatisfactory progress, they will need to schedule a meeting with the Program Director and Admission Coordinator to discuss eligibility and cost of re-enrollment.

TERMINATION POLICY

Students may be terminated from enrollment for any of the following reasons:

- Excessive absenteeism: More than 10 consecutive days. This applies in the event the student does not have an authorized leave of absence, or more than 20% of a course.
- The student fails to return as scheduled from an approved leave absence.
 - O Students whose enrollments are terminated for violation of the attendance policy may not reenroll before the start of the next progress evaluation period. This provision does not circumvent the approved refund and cancellation policy.
- Failure to meet academic criteria.
- Failure to meet financial obligation to the school.
- Student Code of Conduct Violation
- Any action to be deemed to be counter to the best interest of the Ray HCA community

COURSE COMPLETION GUIDELINES

Emergency Care Attendant (ECA)/ Emergency Medical Responder (EMR)

To successfully complete the ECA Program, students must earn a minimum grade of a "C" (75%), pass the final psychomotor (skills) examination, and receive a passing grade on the affective evaluation. Failure to earn the minimum grade or fail any other component, constitutes failure from the program.

Emergency Medical Technician

To successfully complete the EMT Program, students must earn a minimum grade of a "C" (75%), as well as successfully complete the Clinical and Field Internships, the final Psychomotor (skills) examination and receive a passing grade on the affective evaluation. Failure to earn the minimum grade or fail any other component, constitutes failure from the program.

Clinical/Field Component

The Clinical/Field Component is an essential part of our Academy. Each clinical and field site is intended to offer the student both a positive learning opportunity and the real-life experience needed to prepare the student for a meaningful and challenging career. The primary purpose of these rotations is to expose the student to patient assessment and treatment. The clinical and field components provide the student the opportunity to practice their basic and/or advanced skills, including documentation and reports.

In the event that there is a change in the Medical Director during the clinical or field component for any advanced student, the clinical and/or field component will be postponed until such time as a new Medical Director is in place.

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CLINICAL EMS COMPONENTS:

To pass the clinical component, students must:

Complete the minimum number of required contact hours:

EMT

12 contact hours in the hospital

36 contact hours in the field

48 contact hours total (minimum)

10 patient contacts in the clinical or field setting to include a variety of adult, pediatric, medical and trauma patients.

Preceptor evaluations identify the student as competent.

Preceptor evaluations which indicate unsatisfactory performance may result in failure of the clinical section.

CLINICAL SITES:

Confirmed as of 2-5-2021:

Permian Basin Ambulance: 808 Tower Dr, #9, Odessa TX 79761

Medical Arts EMS: 2200 N Bryan Ave, Lamesa, TX 79331

WesTex Urgent Care Center: 3401 Greenbriar Dr., Suite 200 Midland, TX 79707

WesTex Urgent Care Center: 210 W. Longview, Suite A Midland, TX 79701

WesTex Urgent Care Center: 1941 E. 37th St, Odessa, TX 79762

Pending signatures as of 2-5-2021:

Medical Arts Hospital: 2200 N Bryan Ave, Lamesa TX 79331

Odessa Regional Medical Center: 520 E 6th St, Odessa, TX 79761

Scenic Mountain Medical Center: 1601 W 11th Pl, Big Spring, TX 79720

Winkler County EMS: 1310 Bellaire St, Kermit, TX 79745

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Didactic Component

To pass the didactic component, students must complete each requirement in their discipline:

ECA

Not be absent more than 20 percent of 84 hours; and

Achieve a passing score of 75% or greater in the Cognitive and Affective Domains

Successfully pass the practical skills evaluation for the Psychomotor Domain

EMT

Not be absent more than 20 percent of 240 hours; and

Achieve a passing score of 75% or greater in the Cognitive and Affective Domains

Successfully pass the practical skills evaluation for the Psychomotor Domain

Module Exams

When an exam is scheduled, the program director/lead instructor shall prepare the exam. The exam may be multiple choice, matching, labeling, essay, or any combination of the above. Students are to complete the exam on Fisdap, or another platform as directed by the instructor. After completion, the exams will be reviewed by the instructor. Exams are graded on the same day. After grading exams, the program director/lead instructor or designee will validate the test. The questions will be evaluated as follows:

- 1. Incorrect answers by 30% or more of the class will be evaluated for content, wording, instruction error and other inconsistencies.
- 2. If determined to be inconsistent or incorrect, these questions may be omitted, and the answer key will be updated.
- 3. Re-grade the exams
- 4. Any question that was omitted will be rewritten or removed from the test bank.
- 5. Grades will then be determined.

Exams will be opened/available for review by the students. The exam may not be copied, photographed, or otherwise duplicated. The exam will be reviewed by an instructor with the

class to clarify any questions or areas of concern. Students have the right to challenge the exam per the "Examination Question Challenges" section of the student handbook. The midterm and final will not be reviewed in this manner. A student who wishes to review the midterm or final must make an appointment with the program director. Any missed exam due to an absence must be taken prior to the beginning of the next scheduled class, either by contacting the lead instructor, or Program Director.

Affective Domain

The Affective Domain measures the student's attitudes, behaviors, and professional attributes, as well as classroom conduct. A student must successfully pass the Affective component of a course in order to successfully complete the program. Appropriate classroom behavior, professional ethics, and adherence to policy will be graded and evaluated. Breaches of this policy will result in a student conference. Significant behavioral issues may result in failure of the affective domain, which will result in dismissal from the Academy. In most cases a written warning and time period for improvement will be given before assigning a failing grade. However, in cases where the behavior is significantly unacceptable, egregious, or poses a threat to the well-being of others, the posting of a failing grade may be immediate and without warning.

Psychomotor Domain

During the program, students will be taught the skills necessary for the assessment and management of patients in emergency situations. It is essential that students take the opportunity to practice and perfect their skills. Therefore, all students are notified that they will practice non-invasive on each other and live, simulated patients as approved by the Academy.

The Academy is aware of both the importance of hands-on practice and the risk of inappropriate behavior. During skills practice sessions, either as a simulated patient, rescuer, or as an observer, students and faculty are expected to behave in a respectful, tactful, and professional manner. Everyone must follow ethical and legal guidelines. If a student or staff member is uncomfortable at any time during the scenario, they have the right to leave the scenario and report their feelings

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to an instructor and/or the Program Director. If a student or staff member witnesses, or is the victim of, sexual harassment, they are to notify the Program Director immediately. All reports are investigated fully and completely.

Students will be expected to demonstrate proficiency in all listed skills before successfully completing each course. The student will learn each skill and have ample time to practice. Students will be checked off on each skill during the laboratory portion of the course in which the skill is introduced and initially taught. Students experiencing difficulty with a skill and unable to demonstrate proficiency will be offered a remediation session and allowed up to two additional opportunities to demonstrate proficiency. The laboratory check-off of skills must be successfully completed prior to the student being allowed to perform the skill in the clinical setting. Each student must then demonstrate proficiency in each required skill during clinical rotations. Demonstrations of proficiency in required skills must be completed before a student is permitted to exit the program.

Students must successfully pass a Final Skills Exam, which will consist of a scenario-based situation. The student will be presented with a live person with simulated illness/injury which they must assess and manage appropriately.

Prior to receiving test results, the student will be allowed to express any concerns regarding the fair completion of any of the skills assessments due to instructor bias, faulty equipment, or any other circumstances that the student felt was a possible factor to their skills assessment. Once the test results are given, the student will not be able to submit a protest to the test results.

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The laboratory check-off of skills must be successfully completed prior to the student being

allowed to perform the skill in the clinical setting. Each student must then demonstrate

proficiency in each required skill during clinical rotations. Demonstrations of proficiency in

required skills must be completed before a student is permitted to exit the program.

Students are required to come to skills practice sessions fully prepared to perform skills and

scenarios. Preparation includes proper uniform, required equipment, skills manual, and the proper

attitude and demeanor to learn and participate. If any of the above are not present, the student

may be dismissed and marked absent.

ECA/EMR Skills:

Patient Assessment: Medical and Trauma

Joint Immobilization; Long Bone Immobilization; Traction Splints

Oxygen Administration; BVM; Cardiac Arrest Management/AED

Bleeding Control/Shock; Vital Signs

Spinal Motion Restriction: Seated and Supine

EMT Skills:

Patient Assessment: Medical and Trauma

Joint Immobilization; Long Bone Immobilization; Traction Splints

Oxygen Administration; BVM; Cardiac Arrest Management/AED

Bleeding Control/Shock; Vital Signs; Blood Glucose Meter

Epinephrine Auto Injector and Epi Kit manual; SVN; MDI

Spinal Motion Restriction: Seated and Supine

The program may add additional skills it deems necessary

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Cognitive Domain

The Cognitive domain is the student's knowledge as demonstrated by written exams, quizzes, and assignments.

The grading scale for the EMT and AEMT course(s) is:

90% - 100% A

80% - 89% B

70% - 79% C

60% - 69% D

0% - 59% F

Students must score a grade of 75% or higher on major exams.

A student who fails a module examination will receive two opportunities to retest and achieve a passing score.

Students are expected to take the exam as scheduled.

Failure to take the exam on the date scheduled, without notification, will forfeit the retest option. For example, if the student misses an exam without prior notification and fails the make-up exam, they are ineligible to retest and may be dropped from the course.

There are specific time limitations for exam retests. That limitation is within three days of the scheduled date. Failure to do so will result in a grade of zero being entered and the student being dropped from the class.

Module exam limits: students may retake up to four (4) Module exam retests. If the student passes the retest, a score of 75% will be recorded. If a student does not pass the retest exam, the student will be dropped from the program. Module exams will have time limits.

Quizzes will be administered after each content module for verification of module completion.

Quizzes comprise a portion of the overall grade. Frequently missed questions will be evaluated for student comprehension.

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Homework assignments may be given. Homework will be due the date the instructor sets. Failure to turn homework in on time will result in a zero for that assignment.

Calculation of final cognitive grades comes from the following formula:

Final Exam	25%
Module Exams	25%
Quizzes	25%
Homework	10%
Affective	15%

After all work has been completed, the student must have a final course average of 75% or better, each module exam must have a score of 75% or better, and a final exam score of 75% or better. Student will be given 3 attempts to pass the final exam, the dates for the 2nd and 3rd attempt will be provided in writing at end of each attempt. A fee will be charged to the student for the 3rd attempt. After the second attempt, the student will have an opportunity to attend a remediation course, which will also be an additional fee to the student and will grant the student one final opportunity to take the final examination.

To be eligible for graduation, the student must have completed the required courses in their selected program. All students must maintain a cumulative grade point average of at least 75% in order to receive a Certificate of Completion. All candidates must have satisfactorily fulfilled all financial, academic, and other obligations to the Academy before they will be eligible for graduation.

CLININCAL GUIDELINES AND POLICIES AND PROCEDURES

All clinical and field internships must be completed prior to taking the final exam.

Students shall wear the appropriate uniform to each clinical rotation. The uniform must be clean and neat and meet the criteria expressed in the dress code.

Students should demonstrate a professional attitude while seeking out learning opportunities without interfering in the care of patients or infringing on patient confidentiality.

Students should come to each rotation ready to participate uniform, equipment, documentation and name badge are required.

All original documentation is due on Fisdap within 24 business of the clinical. Paperwork turned in after the deadline will not count towards meeting the required hours and will be counted as an unexcused absence. The clinical must then be repeated.

Paperwork will be reviewed by the Clinical Coordinator. The student will receive an email if corrections are needed. Corrections are due within 24 hours of the time the email notification is sent. If a clinical packet is returned due to a missing signature, the packet will be given back to the student to obtain that signature. Ray HCA must receive the corrected paperwork within 24 hours of the notification of the missing signature. Failure to turn in the corrected paperwork within the time frame will be counted as an unexcused absence. The clinical must then be repeated.

Any clinical rotations that receive a "Poor" evaluation must be repeated prior to the completion of the program. All evaluations are reviewed by the Clinical Coordinator.

Students are to schedule their rotations where they do not interfere with their job or school schedules. Once rotations are scheduled, they are considered part of the class schedule and attendance is mandatory. Clinicals must not be scheduled less than 8 hours after a shift longer than 24 hours. Appropriate sleep time is required before beginning a clinical rotation of any kind.

Students are allowed to reschedule 2 rotations, with Clinical Coordinator approval under the following reasons:

Work Schedule Change

Employment Change

Important family events

Family Emergencies

Scheduled medical tests or procedures.

Illness

Mandatory work responsibilities (must present documentation)

ID badges must be worn during all rotations, without exception.

Tardiness is not tolerated. Any student arriving more than 10 minutes late will be sent home with an unexcused absence. Students should arrive 15 minutes early. Any preceptor failing to report a tardiness or absence is subject to dismissal.

Meal schedules are subject to the clinical site preceptor. Please have appropriate cash or money to cover your charges. Bringing your meals in an insulated carrier is acceptable. Kitchen amenities may not be available at all sites.

After every rotation, you must complete the necessary paperwork and the preceptor must sign it. Failure to obtain a signature may constitute an unexcused absence.

If you experience any problems or conflicts at a clinical site, contact the Clinical Coordinator or Program Director immediately.

All clinical rotation information is subject to privacy laws and is confidential. Information which causes a psychological or mental health issue should be discussed with an appropriate Ray HCA CISM person or the Program Director. Discussion in private with an instructor is appropriate on-site. Any other discussion of information protected under HIPAA is subject to immediate dismissal from the Academy.

All students will sign up for Clinicals using the Fisdap schedule program.

All students will be required to complete clinical paperwork online using Fisdap. If the student is unable to complete their work online, appropriate forms will be offered until the student gains access to a computer. No extension of the 24-hour deadline is offered due to a lack of computer. Computers are available for use in the Academy office, clinical sites, public libraries, and other locations at no charge.

No overnight shifts will be granted to any student, unless appropriate sleeping accommodations are provided, and permission is granted by the Field Experience site and Clinical Coordinator and/or Program Director.

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While on clinical or field experience rotations, students must function in a student capacity, regardless of any previous or current affiliation or employment with the clinical or field site. Students are not to be substituted for paid personnel.

Students will NOT participate in any amorous or sexual relationships with any preceptor, preceptor partner, instructor, patient, or any other individuals involved with the program.

Clinical and Field documentation must be an accurate representation of the clinical experience. Any falsification of any documentation is grounds for disciplinary action up to and including dismissal from the Academy. Additionally, the Academy may report the incident to the Texas Department of State Health Services for notification and possible refusal of future certification of the student, and decertification of the Preceptor, under EMS Rule §157.36(b)4 and (c)5.

Clinical Experience Absence Policy

All students must attend their clinical and field internships as they are scheduled. In the event that a student misses a rotation without an excuse approved by the Clinical Coordinator, the student will be placed on academic probation. This probation will consist of a counseling session with the lead instructor and Clinical Coordinator and/or Program Director. In this session, they will sign a memorandum of understanding outlining the consequences of additional unexcused absences. In addition to the disciplinary action listed above, a \$100 rescheduling fee must be paid to reschedule the missed clinical. Students will be dropped from the program for a second unexcused absence.

Should a student discover that, for whatever reason, they are unable to attend a rotation, they should contact their Lead Instructor or Clinical Coordinator immediately for an approved reschedule.

The Clinical Coordinator will be solely responsible for determining whether an absence is excused. The following criteria will be used in making this determination:

Death in the immediate family.

Illness or injury to the student as demonstrated by a physician's note.

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Military obligations (unscheduled military event or post restriction as evidenced by commander's note).

Inclement weather as evidenced by official weather advisory.

If a student disagrees with the Clinical Coordinator's determination, they may file a written appeal. If the student is unhappy with the decision of the Program Director, they may schedule a meeting with the Medical Director of Ray Healthcare Academy.

GLOBAL CLINICAL OBJECTIVES

The faculty and medical director of Ray Healthcare Academy believe that in order to achieve at least the minimal knowledge and skills necessary to practice as an entry-level ECA, EMT, the following competencies should be met:

Clinical Objectives

Prior to graduation, the student will demonstrate competency in all areas of their respective courses (as indicated by a minimum score of 75%) including:

Infection control procedures

Patient Assessment

Development of a differential diagnosis based on assessment.

Development of a treatment plan

Evaluating and recording vital signs

Oxygen administration and airway management

Suctioning

Bandaging and splinting

Bleeding Control/Shock Management

Intravenous Therapy -- Intravenous Bolus Medications

Cardiac Arrest Management/AED & CPR

Intravenous Therapy -- Intravenous Bolus Medications

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Joint Immobilization

Long Bone Immobilization

Patient Assessment - Medical

Patient Assessment - Trauma

Pediatric Intraosseous Infusion

Pediatric Respiratory Compromise

Pediatric (<2yrs.) Ventilatory Management

Spinal Immobilization (Seated Patient)

Spinal Immobilization (Supine Patient)

Supraglottic Airway Device

Ventilatory Management – Adult

All other Skills as approved by the Program Medical Director

GLOBAL AFFECTIVE OBJECTIVES

As the attitude, appearance and professionalism of the student reflect on the staff of Ray HCA and the healthcare profession as a whole, evaluations are performed after each clinical. If the evaluation is less than satisfactory, the student will be counseled as above.

Affective Objectives

During all clinical experiences, and while representing the Academy, the student shall:

Arrive at the appropriate location not more than 30 minutes and not less than 15 minutes prior to the beginning of each shift.

Be well groomed and in uniform according to the Uniform Policy.

Display a personable and pleasant attitude.

Show a willingness to learn.

Eagerly participate in all duties as assigned by the preceptor.

Eagerly participate in all non-clinical duties as assigned.

Demonstrate a respect for preceptors, instructors, other staff, patients, and clients.

EMERGENCY DEPARTMENT GOALS AND OBJECTIVES

In addition to the Global Clinical Objectives, certain clinical experiences are best suited to the attainment of specific knowledge and skills. In this context, *Goals* are defined as competencies that will benefit the student if presented with the opportunity to experience them. *Objectives* are competencies that the student will be expected to perform before program completion.

Emergency Department / Urgent Care / Clinical Site Goals

It is the goal of the Academy to expose students to as many experiences as possible. This may include but are not limited to:

EMT:

Administration of medications via metered dose inhalers and small volume nebulizers

Administration of epinephrine via Epi Auto Injector, SQ or IM injections for anaphylaxis

Administration of sublingual and PO medications

Successful supraglottic intubations

FIELD INTERSHIP GOALS AND OBJECTIVES

In addition to the Global Clinical Objectives, certain field experiences are best suited to the attainment of specific knowledge and skills. In this context, *Goals* are defined as competencies that will benefit the student if presented with the opportunity to experience them. *Objectives* are competencies that the student will be expected to perform before program completion.

Field Experience Goal

To provide the student the knowledge and skills necessary to function as an entry-level team member in an EMS system.

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Field Experience Objectives

In addition to the global clinical objectives, the student will actively participate in the following:

Evaluating equipment readiness

Assembling oxygen tanks

Providing spinal motion restriction

Management of wounds

Providing motion restriction of extremities

Lifting and moving

Emphasis will be placed on the following as it relates to specific functions of an EMT in the field:

Participate in pre-call planning en route to calls based on dispatch information, to include discussion of:

Differential diagnoses

Treatment plans

Identification of each team member's role

Identification of specific equipment needed for rescue or treatment.

Perform a scene size-up and respond appropriately to any noted hazards.

Perform an initial assessment to identify life-threatening injuries or illness and manage appropriately.

Initiate interventions necessary to correct or treat any problems found in the initial assessment.

Take a thorough history of the patient's Ray HCA and past medical conditions based on the SAMPLE and OPQRST format

Perform a Detailed Physical ("head to toe") Exam, when appropriate, in a logical, organized fashion.

Formulate a differential diagnosis based on the information obtained from the history and physical exam in a timely manner and relay this differential to the preceptor.

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Develop a treatment plan based on findings of the history and physical exam and discuss it with the preceptor.

Implement the treatment plan, to include:

Institution of appropriate standing orders/protocols using appropriate skill technique.

Institution of therapy in an appropriate sequence based on the situation.

Perform all assessment and interventions in a timely manner based on patient needs.

Deliver a concise and accurate radio or phone report to the receiving facility to include the following: (Report to be done in 30-45 seconds where appropriate)

Service and Unit Number

Age of patient

Gender of Patient

Mechanism of Injury/Chief Complaint

Vital Signs (if appropriate for situation)

Treatment rendered and effect of treatment on patient's condition.

Changes in patient condition

Request orders where appropriate

Confirmation of all orders received.

ETA to facility

Deliver a concise and accurate oral report to receiving facility's designated personnel upon arrival at the facility, to include the following:

Patient Name, Age

Mechanism of Injury/Chief Complaint/Pertinent Past Medical History

Assessment findings

Treatment rendered and effects of treatment on patient condition.

Any changes in patient condition during your care

Initial and current vital signs where appropriate

Write a concise and accurate written report of the call in chronological narrative format.

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Demonstrate effective call management skills, to include the following:

Communicate calmly and professionally with the patient, patient's family, friends and/or bystanders to ascertain pertinent information regarding the patient and inform them of procedures and treatment plans.

Communicate calmly and professionally with appropriate support agencies (to include preceptor crew) to ascertain pertinent information regarding the patient and maintain effective interagency collaboration.

Effectively utilize resources to facilitate an efficient call.

Demonstrate flexibility and respond appropriately to changes in the patient or scene conditions.

Participate fully in all aspects of the call to include the above objectives and:

Establishing initial contact with the patient and support personnel.

Performing interventions as needed.

Participate fully in post call critique to include the following:

Discussion of assessment and history findings.

Discussion of differential diagnosis and treatment plan.

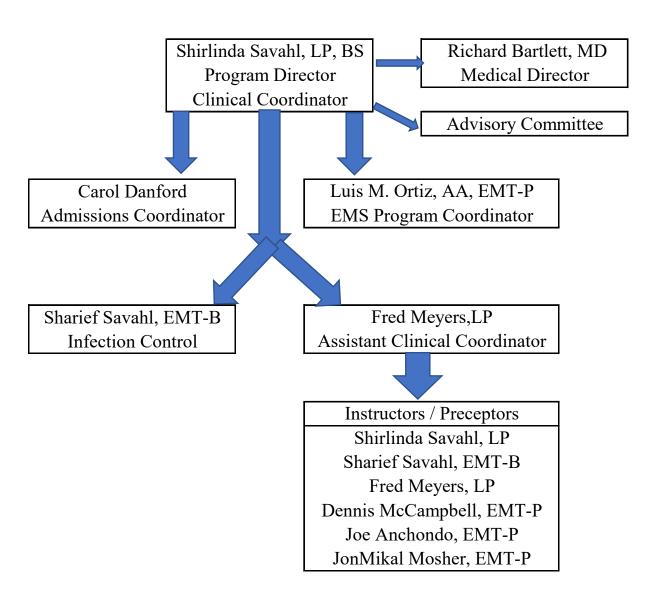
Identification and discussion of what was done well.

Identification and discussion of positive changes for the next call.

ATTACHMENTS A - J

Ray Healthcare Academy, PLLC Organizational Chart

Attachment B



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Ray Healthcare Academy

432-688-7450

Attachment C Unsatisfactory Progress Counseling Form

EMT COURSE NUMBER:
Date:
Instructor:
Coordinator: Luis Ortiz, EMTP-P
Student Name and ID:
has an unsatisfactory cumulative average as of the date of this document. Current GPA:
The Student Handbook states all students must maintain an academic average score of 75% or above throughout the course.
<u>Academic Probation:</u> This document details the date, transgression, action required, and terms of the probationary period and will be included in the student's permanent file.
Action Required: Student will increase grade point average above 75% including, but not limited to, academic work, attendance, clinical performance reports and preceptor evaluations until next progress evaluation on date: (not to exceed 30 days).
<u>Terms:</u> Students achieving a cumulative average of 75% at the end of the probationary period will be returned to good standing. If the student achieves satisfactory progress during the probationary period but does not achieve the required quiz or test grades to maintain 75%, the student will continue on academic probation for an additional progress evaluation period, not to exceed 30 days. Students who fail to achieve 75% at the end of two progress periods (not to exceed 60 days), will be dismissed from the program without a refund.

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Ray Healthcare Academy

432-688-7450

Attachment C Unsatisfactory Progress Counseling Form

Instructor Comments:		
Student Comments:		
Student Signature:	Date:	
Instructor Signature:	Date:	
Director Signature:	Date:	

Attachment D

Student Incident & Injury Form

Witness Report to Student Incident or Injury

Witness Name	
Witness Email	
Witness Phone	
Witness Title	
Student Name	
Date of Incident	
Time of Incident	
Injured Body Part	
Name & Address of	
Incident Location	
Circle RayHCA	Shirlinda Savahl 432-528-7145 Sharief Savahl 432-528-4442
contact person	Fred Meyers 432-301-0001
Date & Time of	
contact of RayHCA	
Circle method	TEXT PHONE CALL EMAIL
Contact successful?	YES NO
If no contact with	
any RayHCA rep, describe actions	
taken for safety and	
health of student,	
patient and staff	
Did YOU witness	YES NO
the incident/injury?	

the law.

Attachment D Student Incident & Injury Form

true and correct to the best of my
Date and Time:

Intentional fraud or falsification of this document is subject to the maximum penalty under

Attachment D

under the law.

Student Incident & Injury Form

Student Description of Incident or Injury:	
I hereby certify that I experienced the incident or intrue and correct to the best of my knowledge.	jury and the above information is
Student Name:	
Student Signature:	Date and Time:

Intentional fraud or falsification of this document is subject to the maximum penalty

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Attachment E	Preceptor/Instructor Accident Investigation Report	
Please notify your Cli	nical Coordinator or Program Director immediately following any incider	ıt:
Fred Meyers, Clinica	d Coordinator, 432-301-0001	
Shirlinda Savahl, Pr	ogram Director, 432-528-7145	
Medical Facility wher	e emergency treatment was administered:	
Name of injured perso	n:	
Date and Time of inju	ry:	
Date and Time reporte	ed to Ray HCA:	
	and/or property damage:	
Name and phone num	ber of witnesses:	
Name and address of 1	physical location of the incident:-	

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Description of incident occurrence:		
Describe conditions or actions prior to the inci	ident:	
Corrective action taken to prevent future incide	ents:	
Preceptor / Instructor Signature	Date	
Program Director Signature	Date	

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Student Handbook of Policies and Procedures - Attachments

Attachment F Student Statement of Occupational Injury

This form must be completed within 1 hour from the time of injury

Date of Incident:	Time:	
Name:		
Address:		
Email address:		
Phone:		
Hospital / Ambulance:		-
Instructor:		-
Emergency Contact Name:		_
Emergency Contact Number:		_
Describe the incident in detail (who, what, wh	en, where, how):	

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In your opinion, were you adequately tra	rained for the job in which you were injured?
In your opinion, please describe actions	that could prevent this or future incidents:
•	insurance company, and the Bureau of Worker's edical records pertaining to medical expenses paid or .
Print Name:	Date:
Signature:	
O	OFFICE USE ONLY
eceipt of Form Date:	Time:
ecipient Name:	Recipient Signature:
rogram Director informed Date:	Time:

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Student Handbook of Policies and Procedures - Attachments

Attachment G

Student Grievance Form

The Ray HCA Grievance Procedure requires students to first discuss and attempt to resolve any complaint with the faculty or staff member(s) or other appropriate staff member prior to submitting a Student Grievance Petition form. If the grievance concerns an academic grade, the student must discuss the grade with the instructor first.

If informal discussion does NOT resolve the issue, please fill out this form.

Print Student Name:	
Student Email:	
Student Phone Number:	
Name of Parties Involved:	
Criteria and Nature of the Grievance: Please identify the reason for submitting a and explain, in detail, all circumstances relating to the grievance, using additional sl	
if necessary. All information pertaining to your request will be kept confidential.	
	

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Attempt(s) at Informal Resolution	n: Please explain, in detail, all attempts at informal resolution
and include a copy of the notification	on of the informal resolution outcome with this form.
Examples include: emails sent to in	nstructor concerning the issue, copies of homework
assignments, preceptor evaluation f	forms, etc.
Actions requested to remedy the	situation:
Student Signature:	Date:
	OFFICE USE ONLY
Receipt of Form Date:	Time:
Recipient Name:	Recipient Signature:
Program Director informed Date:	Time:

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Student Handbook of Policies and Procedures - Attachments

Attachment H

Student Appeal Form

The Ray HCA Grievance Procedure requires students to submit a Student Grievance Form if informal discussion does not resolve the issue. Any student may file this Appeal if they are dissatisfied with the Grievance Form decision. The results of this Appeal are final.

A copy of the original Grievance Form must accompany this appeal.

Appeals must be based on the issue of substantive or procedural errors which are prejudicial. The specific grounds to be addressed are:

Were the procedures of the policy followed?

If a procedural error occurred, were the rights of the grievant violated to the extent that a fair review was not conducted?

Was the review conducted in a way that did not permit the grievant adequate notice and opportunity to present facts?

Was the information presented during the review sufficient to justify the decision reached? Was there information existing at the time of the review that was not discovered until after the review?

Criteria and Nature of the Appeal: Please identify the criteria for submitting an appeal and explain, in detail, all circumstances relating to the appeal on the back of this form, using additional sheets of paper if necessary. All information pertaining to your appeal will be kept confidential.

Student Signature:	Date:	
PR	ROGRAM DIRECTOR USE ONLY	
Receipt of Form Date:	Time:	
Program Director signature		

DSHS Self Study Initial Education Program Application

Attachment I Student Complaint and Grievance Procedure Flow Chart This procedure chart encompasses all grievances and complaints.

	Step One: Submit an email complaint to Admissions@RayHCA.com	
If resolved, no further action is needed.	Step Two: Resolved?	If not resolved, submit Grievance Form to info@RayHCA.com For forwarding to Program Coordinator
If resolved, no further action is needed.	Step Three: Resolved?	If not resolved, submit Appeal form to Director@RayHCA.com
	Step Four: Program Director decision is Final.	

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I was the Successful Team Leader.	Change in responsiveness
Team size:	Chest Pain
L. C.	Choking
*Preceptor: Add a new preceptor	_
Response Mode to Scene:	Death
Initial lights & sirens, downgraded to no lights	Device/equipment problem
or sirens	Diarrhea
C Initial no lights or sirens, upgraded to lights &	Dizziness
sirens	Drainage/discharge
C Lights & sirens	Fever
No lights or sirens	Headache, Blurred Vision
Patient Assessment	Malaise
1 attent Assessment	Mass/lesion
I performed the patient interview (patient	☐ Mental/psych
history)	Nausea/vomiting
I performed the patient exam	Pain
The patient required airway management	Palpitations
Patient Alert and Oriented?	Rash/itching
Alert - reacts to environmental stimuli	Swelling
Voice responsive - reacts to verbal stimuli	Weakness
Pain responsive - reacts to painful stimuli	Wound
Unresponsive to verbal or painful stimuli	*Primary Impression:
*Age:	
years months *Gender:	Choose from drop screen Secondary Impression:
Female Male	Choose from drop screen
Ethnicity:	and the server with the server
	Patient Criticality:
Complaints:	 Green - not critical, ambulatory
AMS	Yellow - illness/injuries not yet life-threatening
Abdominal Pain	Red - critical, life-threatening illness/injury
Bleeding	Black - patient dead on arrival
Breathing problem	1

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Student Handbook of Policies and Procedures – Attachment J

Vitals and Interventions	Distant
Blood Pressure: (numbers or "p" only)	Gurgling
	Rhonchi
Pulse: (numbers only)	□ Snoring
	Stridor
Respirations: (numbers only)	Wheezing
SpO2: (0-100)	Blood Glucose:
D : G 1 (0.10)	APGAR (0-10)
Pain Scale (0-10)	
End-Tidal CO2 (3 characters)	GCS: (3-15)
Temperature (use format, e.g. 98.4 or 101.2)	
Skin:	Record all interventions below, even if you did not
Clammy	perform them. See sample report for information
Cold	on documentation.
Cyanotic	
☐ Jaundiced	
□ Lividity	
Mottled	
Normal	
Pale	
□ Warm	
Pupils:	
Equal? NA No Yes	
Round? N\A No Yes	
Reactive to Light? N\A No Yes Lung sounds:	
Absent	
Clear	
Cicai	
Crackles (Rales)	
Crowing	

Ray Healthcare Academy

STUDENT CODE OF CONDUCT



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PO Box 7308 Midland, TX 79708

info@RayHCA.com

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STUDENT CODE OF HONOR

As a healthcare professional I will not lie, cheat, steal, or tolerate those that do.

STUDENT CODE OF CONDUCT

The purpose of listing rules for student conduct and disciplinary action which may be taken for violations is as follows:

To inform students of what is considered unacceptable behavior.

To inform students of the possible consequences of unacceptable behavior.

Violation on the part of a student of any of the following rules of conduct shall result in disciplinary action. Record of a disciplinary action shall be maintained in the student's academic file. Action may include but is not limited to verbal and/or written reprimand; confiscation of contraband; loss of leadership positions; loss of privileges to attend or participate in assemblies, banquets/ceremonies; loss of awards, letters, or recognition; emergency removal; intervention referral; expulsion; permanent exclusion; and/or referral to appropriate legal authorities.

Any student dismissed from the program for academic dishonesty (cheating) will be permanently excluded from any future enrollment at the Academy.

The Student Code of Conduct governs student behavior at all times while the student is enrolled and representing the Academy.

Honesty and Integrity: Refuses to lie, steal, or deceive in any way. Abides by the EMS Code of Ethics (which is similar to ethics for other healthcare providers).

Punctuality: Arrives on time for class and clinical rotations. Completes assignments on time.

Cooperativeness: Follows established school procedures. Demonstrates willingness to work well with others and is receptive to suggestions for improvement.

Pride in Workmanship: Strives for improvement in assignments and clinical experience. Requests assistance when having difficulty in attaining the specified performance standards.

Mature Actions: Assumes responsibility and consequences for personal actions. Accepts personal limitations. Strives to resolve personal conflicts.

Consideration for Others: Demonstrates by verbal and non-verbal communication, thoughtful regard for the feelings and rights of other students, faculty, staff, and clinical personnel.

Concern for Patients: Demonstrates by verbal and non-verbal communication thoughtful regard for the feelings and rights of patients and their family or other support persons. Refrains from verbal remarks or facial expressions which could cause undue alarm or embarrassment to the patient. Respects the patient's right to confidentiality and refrains from negative comments in the presence of the patient.

Enthusiasm: Displays initiative while in class and in the clinical experience. Volunteers to assume additional responsibility and leadership.

Ability to Accept Constructive Criticism: Strives to improve and is receptive to suggestions for improvement.

Loyalty: Supports with words and actions the ideals of the Academy and the healthcare profession as a whole.

Pride in Personal Appearance: Maintains a professional appearance and personal hygiene that is consistent with the Academy's policies.

Tact: Exercises discretion in their words and actions to maintain good relationships with patients, peers, and faculty.

Although the following code is written to EMS Professionals, its words are relevant to all Healthcare Professionals.

Code of Ethics for EMS Practitioners

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

- To conserve life, alleviate suffering, promote health, do no harm, and encourage the quality and equal availability of emergency medical care.
- To provide services based on human need, with compassion and respect for human dignity, unrestricted by consideration of nationality, race, creed, color, or status; to not judge the merits of the patient's request for service, nor allow the patient's socioeconomic status to influence our demeanor or the care that we provide.
- To not use professional knowledge and skills in any enterprise detrimental to the public well-being.
- To respect and hold in confidence all information of a confidential nature obtained in the course of professional service unless required by law to divulge such information.
- To use social media in a responsible and professional manner that does not discredit, dishonor, or embarrass an EMS organization, co-workers, other health care practitioners, patients, individuals, or the community at large.
- To maintain professional competence, striving always for clinical excellence in the delivery of patient care.
- To assume responsibility in upholding standards of professional practice and education.
- To assume responsibility for individual professional actions and judgment, both in dependent and independent emergency functions, and to know and uphold the laws which affect the practice of EMS.
- To be aware of and participate in matters of legislation and regulation affecting EMS.

- To work cooperatively with EMS associates and other allied healthcare professionals in the best interest of our patients.
- To refuse participation in unethical procedures and assume the responsibility to expose incompetence or unethical conduct of others to the appropriate authority in a proper and professional manner. (Gillespie, 1978)

The following conduct violations may result in immediate dismissal from the Academy and possible legal consequences:

Lying

Cheating or other acts of academic dishonesty.

Stealing, including, but not limited to appropriating or possessing without authorization, medications, supplies, equipment, or personal items from: The Academy, any clinical site used by the Academy, any student, patient, or employee of Ray HCA without permission.

Discriminating of the basis of national origin, race, color, creed, religion, sexual orientation, gender, age, disability, medical condition, or economic status while engaging in activities related to the Academy.

Abandonment of a patient.

Misstating or misrepresenting a material fact on any other documentation required for admission to the program.

Materially altering any certificate or license issued by an EMS certifying or licensing organization or agency or any other certificate or license required as a condition for admission to or successful completion of any course offered by the program.

Falsification of any records or clinical reports.

Attempting to satisfy course requirements or otherwise obtain certification by fraud, forgery, deception, misrepresentation, or subterfuge.

Using, being under the influence of, possessing, or distributing alcohol or illegal drugs while participating in any phase of instruction (classroom, laboratory, clinical, or field).

Willfully damaging hospital, clinical affiliate, Ray HCA or PBCPR property.

Conviction of a felony while enrolled in the program.

Failing to maintain confidentiality of information regarding patient care or any other events that occur at clinical or field internship sites.

Sexual misconduct, sexual harassment, sexual assault, obscene jokes, or gestures (verbal, written, social media or in any other context), or inappropriate contact.

Disruption of classroom, laboratory, clinical, or field instruction or interference with the orderly operation of the healthcare program.

SEXUAL HARRASMENT

Sexual harassment undermines the integrity of the academic and work environment and prevents its victims and their peers from achieving their full potential. All members of the Academy are entitled to work and study in an atmosphere free from sexual overtures or innuendoes that are unsolicited and unwelcome. It is the particular responsibility of those members of the Academy who hold positions of authority over others to avoid actions that are or can be considered sexually abusive or unprofessional.

It shall be a violation of this rule for any officer, employee, student, or agent to sexually harass, as sexual harassment is hereinafter defined, any other officer, employee, student, visitor, or agent.

Sexual harassment is a type of misconduct which shall result in disciplinary action pursuant to the Academy and the terms of any applicable collective bargaining agreement, or other corrective measures such as a requirement to undergo training or counseling.

Definition of Sexual Harassment:

For the purpose of this rule, sexual harassment is defined as conduct of a sexual nature which includes:

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Verbal harassment or abuse of a sexual nature, including intimating by way of suggesting a desire for sexual relations, or making jokes or remarks of a sexual nature which are not germane to the workplace or to academic course content.

Displaying or posting through any medium, including, but not limited to, electronic communication, offensive sexually suggestive pictures, or materials in the workplace.

Use of sexually suggestive terms or gestures to describe a person's body, clothing, or sexual activities.

Unwelcome physical contact of a sexual nature such as patting, pinching or unnecessary touching. Overt or implied threats against an individual to induce the recipient to provide sexual favors or to engage in an unwelcome sexual relationship.

For purposes of enrollment as a student at the Academy, sexual harassment is defined as:

Any unwelcome sexual advances, requests for sexual contact, and other verbal or physical conduct of a sexual nature, including, but not limited to, instances where:

Submission to such conduct is made either explicitly or implicitly a term or condition of a student's academic achievement.

Submission to or rejection of such conduct is used as a basis for decisions regarding the evaluation of a student's academic achievement.

Such conduct has the purpose or effect of interfering with an individual's academic performance or creating an intimidating, hostile, or offensive academic environment.

Retaliation: It shall be a violation of the Academy's policy against sexual harassment for an employee or student to retaliate against someone who has made or filed a complaint against them alleging they have engaged in sexual harassment.

Dissemination of Policy:

Employees. It shall be the responsibility of the Academy Director to disseminate the Academy's Sexual Harassment policy to all employees of the Academy.

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Students. The Academy's Sexual Harassment Policy shall be published in the Academy's academic catalog(s), Student Information Handbook or in other publications of general circulation to students. The Academy shall publish and widely disseminate notice of changes in the policy.

Hazing

Hazing is forbidden by law.

Hazing is defined as:

Any actions which seriously imperil the physical well-being of any student.

Activities, which by nature are indecent, degrading, or morally offensive.

Activities which by their nature may reasonably be assumed to have a degrading effect upon the mental attitude.

Any incidents of hazing will not be tolerated and will subject the student to disciplinary action, up to and including dismissal from the Program.

STUDENT RESPONSIBILITIES AND DISCIPLINARY ACTION

Academic Success

Expected behavior: To ensure success in the Academy, you are expected to complete all class and homework assignments on time and to the best of your ability.

Reason for Expected Behavior: Effort and determination are keys to success. By putting forth your best efforts and taking pride in your work you will ensure greater success.

Consequence of Misbehavior: Lack of academic progress will result in student-faculty consultation. Continued lack of diligence may result in disciplinary action, such as probation.

Respect for Others

Expected Behavior: You are expected to treat all people with consideration and respect. Physical or verbal violence towards others is unacceptable, including fighting, pushing, verbal harassment, tripping, kicking, horseplay, extortion, or any form of personal harassment of others.

Behavior that is sexual in nature, including unwanted physical contact or unwelcome sexual remarks, is sexual harassment and will not be tolerated. The Academy is not an appropriate place for displays of affection.

Reason for Expected Behavior: Every person needs a positive self-image and has the right to be treated with respect. Emotional intelligence is important in academia and the workplace. Aberrant behavior may hurt someone physical or emotionally.

Consequences of Misbehavior: Disrespect or inappropriate behavior will result in a written account of the incident. Serious or repeated infractions may result in suspensions and possible criminal charges. Appropriate behavior will be determined by Administration.

Appropriate Language

Expected Behavior: Your language will be such that it shows respect for staff and students. Name calling, swearing, crude, rude, obscene, or abusive language spoken, written, implied or gestured are unacceptable. When in dispute, acceptable language or behavior will be determined by the Program Director.

Reasons for Expected Behavior: Proper speech and grammar is imperative in a professional environment. The ability to succinctly speak to colleagues and patients is expected of all healthcare professionals.

Consequence of Misbehavior: The use of inappropriate language while participating in a Ray HCA event will result in a written account of the incident. Serious or repeated infractions may result in suspensions and possible criminal charges. Appropriate behavior will be determined by Administration.

Honesty

Expected Behavior: You are expected to be honest with students and staff. You are expected to submit work which is original and represents your own best efforts. Stealing, lying, and cheating are forms of dishonesty and are unacceptable behavior.

Reasons for Expected Behavior: You will benefit from your relations with others only by being open and honest in what you say and do. Dishonesty in your words or actions or written work has a negative effect on your reputation and that of the Academy.

Consequences of Misbehavior: You must realize that dishonesty carries serious consequences. In the case of stealing, retribution will be made at your expense and criminal charges may be filed against you. An academically dishonest act intentionally violates the community of trust and is not tolerated. For healthcare professionals, academic dishonesty violates the standards of moral and ethical conduct established by our profession. More importantly, it violates the trust developed between us and our patients and other healthcare professionals. The following examples illustrate specific acts of academic dishonesty. This is not intended to be all-inclusive.

Any use of external assistance during an exam unless permitted by the instructor.

Communicating in any way with another student during the exam.

Copying material from another student's exam.

Allowing another student to copy from your exam.

Using unauthorized notes, calculators, or other devices.

Any intentional falsification or invention of data or information in an academic or clinical exercise: Inventing, altering, or falsifying data for a patient report.

Submitting materials as your own when someone else completed or created the work.

Communicating false, altered, or incomplete information within the course of clinical care and/or internship documentation.

"The term plagiarism derives from the Latin word 'plagiarius,' meaning 'kidnapper' or 'abductor.' Although plagiarism is difficult to define in few words, it can be viewed as the stealing of another person's ideas, methods, results, or words without giving proper attribution" (Juyal, Thawani, & Thaledi, 2015). If a student intends to use the words or ideas of another, they must reference the source in APA format. Any inference that such words or ideas are those of the student is considered plagiarism and is subject to penalty.

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EMS students are required to understand and abide by all policies and guidelines pertaining to scholastic integrity contained in the Ray Healthcare Academy Student Policy and Procedures Manual and the Student Code of Conduct Manual. Academic or clinical dishonesty may result in disciplinary action up to and including dismissal from the program.

Cheating on a test or project will result in dismissal from the program. Academic scores are important and can only be validated by honest effort.

In the case of lying, a meeting will be arranged with you and your instructor, to discuss the situation. Lying may jeopardize your enrollment in this Academy, and you may be dismissed.

A student who has been found responsible for serious or repeated misconduct will be suspended or dismissed from the program.

Care of Academy Property

Expected Behavior: You will respect all Academy property (classrooms, equipment, textbooks, supplies, etc.)

Food and drink should be consumed in the break areas or other designated areas during non-instructional time, unless otherwise authorized by the instructor or Program Director.

Students are responsible for cleaning up after themselves. No food or drinks are allowed around computers or other electronic equipment.

Reasons for Expected Behavior: Respect for Academy materials is expected. Loss of use due to student negligence will result in a monetary fine to replace the equipment or supplies.

If textbooks or other Academy materials are destroyed, lost, or stolen the student will be required to pay the replacement cost. Intentional damage is a crime and will be dealt with by the proper authorities. Ray HCA reserves the right to limit the use of food and drinks on Academy property.

BLOOD AND BODILY FLUID EXPOSURE

A student or preceptor, who has a known or suspected exposure to an infectious disease during the performance of their academic responsibilities, will follow the employee exposure policy at the facility at which the exposure occurred and the Academy's Infection Control Plan. Examples of

exposures include parenteral exposure (e.g., needle stick or cut), mucous membrane exposure (e.g., splash to the eye or mouth), cutaneous exposure involving large amounts of blood, or prolonged contact with blood (especially when the exposed skin is chapped, abraded, or afflicted with dermatitis).

In addition to following the employee exposure procedure at the facility, the following steps will be taken:

Immediately wash, irrigate, and flush the exposed area, as appropriate.

The student must notify the Preceptor and/or facility supervisor immediately with the following information:

Patient's Name

Patient ID number

Date and time of exposure

Type of exposure

The Preceptor and or facility supervisor will immediately notify the appropriate facility staff person. Prompt reporting is required in order to facilitate post-exposure prophylaxis.

Notify Clinical Coordinator or Program Director within one hour of incident and complete the Occupational Injury Form.

Faculty or an appropriate counselor will counsel the Student/Preceptor regarding the risk of possible infection as soon as possible after exposure.

Faculty will refer the Student/Preceptor to their private physician or the appropriate public health facility. The care and compensation of infected students is the financial responsibility of that person and their health insurance.

ACCIDENT AND INCIDENT REPORTING

Ray HCA does not accept liability for accidents or incidents that occur to students or faculty or staff during scheduled school hours or activities, including clinical rotations.

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In the event of an unusual incident involving a student, employee of the clinical facility, and/or patient, the student should provide written documentation of the incident to their instructor using the Occupational Injury Form or Witness Report, as applicable. The student must also immediately notify their preceptor and instructor. An example of an unusual incident is a patient injury witnessed by the student during the clinical rotation.

In the event a student is injured during a clinical rotation, they must notify the preceptor immediately. The preceptor will provide written documentation of the incident to the Clinical Coordinator or Program Director within one hour of the incident using the appropriate form. This written reporting must not delay the student from seeking medical attention, if required.

UNIFORMS

Students of the EMS programs are required to wear the student uniform. Several of the sites in which clinicals are performed have strict policies regarding personal appearance and hygiene. In order to conform to these policies and the Code of Conduct for students enrolled in Ray HCA, the following Uniform Policy will be followed at all times while in class and on clinical rotations:

Prior to wearing the school uniforms, students may wear pants and shirts that do not violate the code below.

Blue Polo Shirt – The Ray HCA logo will be embroidered on left chest. No other patches or pins are permitted. Student ID Badge is to be worn on the center of uniform, above the waist.

White, Black or Blue Crew-Neck Tee Shirt – may be worn under the uniform on rotations, plain shirt without designs or statements. A solid color long sleeve shirt or mock turtleneck may be worn under the uniform shirt in cooler weather.

Navy Blue or Black Uniform Pants – EMS or cargo style pants (Propper, TruSpec, 5.11, etc.).

Black Boots – boots above ankle with non-slip soles or steel toe boots.

Black Belt – plain leather without excessive tooling, plain silver buckle, or hook/loop fastener.

Brassieres – required at all times for applicable students.

Socks – required, must be black if visible.

Glasses – prescription only. Blue light lenses are acceptable during computer work.

Medical Equipment – Each student must have a personal stethoscope, pen light, watch with seconds, and safety eye wear for each clinal and field rotation.

While dressed in the uniform and in the public view, whether on a clinical rotation, in school, before or after class or before or after a clinical rotation, all policies regarding the wearing of the uniform will be followed.

The uniform is not to be worn in public venues unless serving in an official capacity.

At no time should the uniform be worn where alcohol is served or consumed, other than while on a call during a clinical rotation, or at a restaurant with a preceptor and/or fellow students.

While in student uniform all inappropriate or offensive tattoos must be covered.

Students are to wear the uniform with the shirt properly buttoned and tucked.

Boots are to be properly laced or zipped.

Hats are not permitted at any time other than cold weather and must follow the cold weather policy.

Students are to be clean and neatly shaved at the beginning of each shift and prior to starting class.

Uniforms are to be worn from the moment the student is in the public view.

School property means the Ray HCA building or location which hosts the class.

Students may wear the uniform to restaurants for meals while in class or on clinical rotations permitted, they show professionalism and represent the program and EMS at the highest level.

It is recommended that each student have a second uniform with them on clinical rotations for use in the event the first uniform gets soiled or contaminated by blood or other body fluids.

PROGRAM STUDENT ID

Once issued, the Student photo ID is to be worn by on the shirt, above the waist, while actively participating in EMS Program activities. Students must wear the ID with the picture visible.

The photo ID is the property of the Ray Healthcare Academy Healthcare Training Program and must be surrendered upon request. Academy faculty may confiscate the ID for violations of the uniform policy both in class or on campus, for violations of the professionalism policy, or for other

issues related to ethical or moral behavior. Students are not to participate in clinical rotations while their ID is in the possession of the Academy. The Academy will return the ID to the student following a full investigation for issues related to ethical or moral behavior.

GROOMING/HYGIENE

To be followed on clinical rotations and in class:

Hair must be clean, neatly groomed, of a natural color and tied back above the shoulders if length is below the bottom of the collar while standing. The hair style must be such that remains neat and professional throughout the clinical rotation,

Facial hair must be groomed and allow for proper fitting of all required PPE. Final decision is the responsibility of the Clinical Coordinator and/or Program Director.

Perfume and aftershaves are not allowed. Use of deodorant is required. Toothpaste and breath fresheners are required. Makeup, if worn, should be natural.

Smoking or ANY other use of tobacco products, while in public, is strictly prohibited while in the classroom or in clinical uniform (this includes vaping).

Ray HCA reserves the right to remove students from the classroom or clinical site for poor hygiene. This includes strong body or breath odors, including and especially tobacco, or unkempt appearance.

JEWELRY AND BODILY DECORATIONS

No jewelry except wedding bands, allergy alerts, religious icons on appropriate material worn under the shirt. Stud earrings, max of one in each ear. No other visible or tongue piercings are allowed.

Students may wear long sleeve shirts to cover inappropriate or offensive tattoos on the arms. Turtleneck shirts may be worn to cover inappropriate or offensive tattoos on the neck.

FIREARMS/WEAPONS

Weapons are not allowed on clinical rotations. Police departments which require officers to carry a weapon at all times must obtain written permission from each clinical site prior to the rotation.

COLD OR WET WEATHER

Jackets worn should be navy blue or black. If a blue or black uniform jacket is not available, any jacket or coat which is free of patches or insignias is permitted. A long sleeve white, black, or blue shirt may be worn under the uniform shirt in cooler weather. Sweaters are not permitted.

Hats are not permitted at any time other than conditions of extreme weather and designed for protection from heat loss. Plain design or non-offensive logos or insignias are required.

Raincoats should be plain, without designs or statements.

FAILURE TO FOLLOW THE UNIFORM POLICY

Students are to report to the clinical site fully dressed in the weather appropriate clinical uniform. Students who are found on a clinical rotation out of the proper uniform will be asked to leave the clinical site. All hours completed prior to leaving the rotation, including hours from previous clinical experiences, will not count toward the minimum requirement. A full investigation will be conducted by the Clinical Coordinator. If it is determined that the student was found to have been out of the proper uniform, they must repeat the entire rotation in order to receive credit.

The clinical uniform is graded through the clinical section of the program. Students who fail to represent Ray HCA in a positive light through unethical, immoral, or illegal actions while dressed in a Ray HCA uniform WILL receive a failing grade for the clinical section, thus preventing the student from completing the program.

Reasons for Expected Behavior: Your appearance should reflect good judgment and respect for yourself and others.

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Consequences of Misbehavior: If you wear inappropriate clothing as determined by Administration, you will be asked to leave and you will be counted as an unexcused absence.

ALCOHOL AND DRUGS

Expected Behavior: You will not use, distribute, be under the influence of, or be in possession of alcohol or illegal drugs while on Academy property or during any Academy-sponsored function or activity.

Reason for Expected Behavior: Healthcare professionals should develop positive self- esteem and a healthy lifestyle.

The use of alcohol and illegal drugs is dangerous, both to you and those with whom you work. The law forbids you, for your own protection, to use these items.

Consequences of Misbehavior: Proper authorities will be immediately notified to investigate the incident. The possession or use of alcohol and illegal drugs will result in suspension and likely removal from the Academy and the Program Director will be notified immediately.

CELL PHONES AND ELECTRONIC DEVICES

To eliminate distractions in the classroom the following policy will be followed by all students: All cell phones, and any other electronic device, including smart watches, which have an audible alert function must be turned off or placed on silent and be placed out of sight.

Cell phones are permitted to be used in the classrooms and lab of the Academy if such use is approved by the instructor and such use benefits the student as a camera, video camera or voice recorder. If use distracts the student or others from learning in class, the cell phone or other device must be turned off and put away.

Cell phones are NOT PERMITTED during clinical or field rotations during patient care or while responding to a call. Preceptors reserve the right to confiscate any items which may contain

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HIPAA violations. Confiscations will result in immediate dismissal of the student from the site and possible legal consequences.

SOCIAL MEDIA/ SOCIAL NETWORKING SITES

Social media sites, such as Facebook, Instagram, LinkedIn, and Twitter should be used cautiously as it pertains to the Academy. Students should use discretion when using these social networking sites. Postings may inadvertently or purposefully include information with concerns of confidentiality, exposing the student to legal consequences, including civil liabilities.

When using any social networking site, students are required to represent themselves in a manner that conforms to the policies, procedures, and ethical standards of the Academy, and the healthcare profession as a whole.

Students will be deemed in violation of the Academy's Policy and Procedure Manual to post any pictures or any other images of any clinical or field activities, program materials, or any activity that deems to put the Academy in any negative light. Furthermore, students may not access or utilize any social networking sites while in class or in a clinical or field experience rotation. Violations of this policy are grounds for disciplinary action, including dismissal from the program. Incidents may be reported to the Department of State Health Services (DSHS) for further investigation.

CONTRABAND

Expected Behavior: Certain materials are contraband and are not allowed on Academy premises. This would include such items as weapons or any objects threatening the well-being of others, drug paraphernalia, stolen goods, pornographic materials, stink bombs and incendiary items. The classification of what is contraband will be determined by Administration.

Reason for Expected Behavior: Contraband makes for an unsafe or offensive environment. Consequences of Misbehavior: Contraband will be confiscated. Appropriate authorities will be

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contacted and in serious cases, the student may be removed from the Academy and no refund will be issued.

STUDENT PROPERTY

Expected Behavior: Cellular phones and personal communication or media devices are permitted in the Academy, but they must be off, on silent, or vibrate only during class sessions. Other personal possessions should be kept in the student's vehicle, except what is needed for class or skills.

Reason for Expected Behavior: It is not the Academy's responsibility if these articles are stolen, lost or damaged. Lockers are not available at any classroom or clinical site.

Consequences of Misbehavior: The articles may be stolen, lost or damaged. The Academy accepts no liability for any loss or damage of personal items due to student negligence or the actions of another student.

STUDENT CONFIDENTIALITY

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

FERPA gives parents certain rights with respect to their children's education records. These rights transfer to the student when they reach the age of 18 or attend a school beyond the high school level. Students to whom the rights have transferred are "eligible students."

Parents or eligible students have the right to inspect and review the student's education records maintained by the school. Schools are not required to provide copies of records unless, for reasons such as great distance, it is impossible for parents or eligible students to review the records. Schools may charge a fee for copies.

Parents or eligible students have the right to request that a school correct records which they believe to be inaccurate or misleading. If the school decides not to amend the record, the parent or eligible student then has the right to a formal hearing. After the hearing, if the school still decides not to amend the record, the parent or eligible student has the right to place a statement with the record setting forth their view about the contested information.

Generally, schools must have written permission from the parent or eligible student in order to release any information from a student's education record. However, FERPA allows schools to disclose those records, without consent, to the following parties or under the following conditions (34 CFR § 99.31):

School officials with legitimate educational interest.

Other schools to which a student is transferring.

Specified officials for audit or evaluation purposes.

Appropriate parties in connection with financial aid to a student.

Organizations conducting certain studies for or on behalf of the school.

Accrediting organizations.

To comply with a judicial order or lawfully issued subpoena.

Appropriate officials in cases of health and safety emergencies.

State and local authorities, within a juvenile justice system, pursuant to specific State law.

Schools may disclose, without consent, "directory" information such as a student's name, address, telephone number, date and place of birth, honors and awards, and dates of attendance. However, schools must tell parents and eligible students about directory information and allow parents and eligible students a reasonable amount of time to request that the school not disclose directory information about them. Schools must notify parents and eligible students annually of their rights

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under FERPA. The actual means of notification (special letter, inclusion in a PTA bulletin, student handbook, or newspaper article) is left to the discretion of each school.

CLASSROOM ETIQUETTE

Instructor Responsibility

The instructors are responsible for maintaining discipline within the classrooms and providing a healthy and positive learning environment.

Student Responsibility

The student must follow the proper standards of conduct and respect other students and staff at all times. A student's behavior in or outside the classroom must not violate the rights of other students, staff, or faculty.

STUDENT'S RIGHTS

Every student at Ray Healthcare Academy is entitled to enjoy the basic rights of citizenship which are recognized and protected by the laws of this country and state.

In the case of any grievance, complaint, or concern, the student should contact any staff or faculty member of the program.

FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT OF 1974 (FERPA)

Under the authority of the Family Educational Rights and Privacy Act of 1974, as amended, students have the right to examine certain files, records, or documents which pertain to them. The school must permit students to examine such records within 45 days after submission of a written request, and to obtain copies of such records upon payment of a reproduction fee and retrieving the record from storage. Reproduction fee will be 0.25 cents per page plus delivery fee of records to Academy. The school will retain student records for at least a seven-year period.

EDUCATION RECORDS

Education records are all school files, records or documents which contain information related to the students. Examples of education records are the student's education file and financial documents. The only persons allowed access to such records are those who have a legitimate administrative or educational interest, as stated above.

REVIEW OF RECORDS

It is the policy of the school to monitor educational records to ensure that they do not contain information, which is inaccurate, misleading, or otherwise inappropriate. The school may destroy records which are no longer useful or pertinent to the students' circumstances.

TUTORIAL SERVICES

Tutoring will be offered to any student, without charge, upon request, and by appointment. Instructors will assist with tutoring and will arrange tutoring while the student is enrolled in a Ray HCA program. Group study sessions may be held by any faculty or staff with open admission to any student in good standing or on academic probation. Students on academic probation will be held to the terms of their probation regarding attendance.

STUDENT ACTIVITIES

Professional achievement in any field involves social and community responsibility and adaptability. Ray Healthcare Academy affords students activities which extend their academic expertise outside the classroom. These activities include field trips to local workplaces, as well as informal gatherings which promote good interpersonal relationships. Students may hear and meet with guest speakers, business owners, experts in various business enterprises, and professionals from different fields. Participation in trade shows and other special events integrates student skills with Ray HCA business trends and products.

Ray Healthcare Academy RayHCA.com

Student Handbook of Policies and Procedures

FINANCING AND FINANCIAL ASSISTANCE

Ray HCA does not offer any financial aid assistance. Students are offered information concerning

financing with third party lenders or financers upon request. Ray HCA is working to develop

relationships with lenders. Scholarships and grants are available by submitting an application to

https://pbaf.org/scholarships/

UNIFORM COMPLAINT PROCEDURES

Ray Healthcare Academy recognizes its responsibility to ensure compliance with state and federal

laws and regulation governing educational programs and activities. In accordance with state

guidelines, the learning center has adopted a Uniform Complaint Procedure, which shall be

followed when addressing complaints alleging unlawful discrimination, harassment, intimidation,

or failure to comply with state and federal laws. Students with unresolved grievances can direct

the grievances to:

Texas Department of State Health Services www.dshs.state.tx.us

1-800-452-6086

Kenya Johnson, MA

Customer Service Coordinator

Texas Department of State Health Services PO BOX 149347

(Physical address: 1100 W. 49th Street, M646) Austin, Texas 78756

Or

Council on Occupational Education 41 Perimeter Center East, NE. Suite 640

Atlanta, Georgia 30346

(800) 917-2081 or (770)396-3790

www.council.org

CONFLICT RESOLUTION

Ray Healthcare Academy recognizes that students will encounter disheartening, unpleasant and hostile situations. These situations may arise from interaction with individuals or groups of students, faculty, clinical/field preceptors, or sites, the public, or the witnessing of emotionally traumatic events.

While the Academy cannot protect the student from the dangers and realities of the world encountered during the clinical and field rotations, the Academy will make every effort to prepare the student with the knowledge and skills necessary to protect themselves, emotionally and physically. The student must take the responsibility to use those tools, when necessary, such as any incident containing offensive or derogatory language, attitude, or behavior, whether innocently or maliciously based on race, religion, gender, ethnic background, national origin, age, veteran status, or disability from any other student, clinical or field personnel, and faculty.

Conflicts Occurring in the Classroom

Student conflicts should be professionally handled between the persons involved. If the situation cannot be resolved between the parties, the instructor or Program Director should be notified. The situation will be handled according to the appropriate Academy policy.

Conflicts During Clinical/Field Rotations

Any incident that occurs during a clinical or field rotation must be reported immediately to the preceptor. If the incident involves the preceptor, an attempt at conflict resolution with the preceptor should be attempted. If the situation cannot be resolved, then the next person in their chain of command should be contacted. If the incident remains unresolved (or the student is uncomfortable with approaching the supervisor), the student should leave the site and immediately notify the instructor or Program Director via phone or text from a safe area. The student must receive a response before leaving the clinical site entirely.

RayHCA.com

Student Handbook of Policies and Procedures

In the interest of the clinical or field experience site to resolve the problem internally. However, it is the responsibility of the clinical/field site to report problems and resolution decisions to the Academy.

GRIEVANCE PROCEDURE

Students having a grievance concerning an evaluation, grade, academic action, or disciplinary action should first contact the person responsible within 5 days of the alleged grievance. If the student is not satisfied with the response of the person responsible for the action, they should contact the Admissions Coordinator. If a student is not satisfied with the admission coordinator's response, they may appeal to the Program Director. The decision of the Program Director is final.

A student may grieve an operational or administrative decision using the following method:

- 1. The student should discuss the situation with the Lead Instructor.
- 2. If the student does not gain satisfaction from the discussion with the primary instructor, they shall submit the grievance form within 5 days to the Program Coordinator.
- 3. The Program Coordinator shall reply to the student within 5 days following submission of the grievance to discuss the matter. The Program Coordinator shall then provide a written reply to the student within 5 days of the discussion. The Program Director shall receive a copy of the Program Coordinator's written reply.
- 4. If the student does not gain the satisfaction desired, the student may submit an Appeal Form to the Program Director within 5 days of the student discussion with the Program Coordinator. Following review, the Program Director will respond within 5 days.
- 5. The decision of the Program Director shall be final.

See Attachment I for the Student Complaint and Grievance Procedures Flow Chart.