



**DIVISION OF HEALTH SCIENCES
STUDENT HANDBOOK
AND
POLICY MANUAL**

**With Surgical Technology Program
Addendum**

Revised for the Fall 2017 Semester

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SECTION I: INTRODUCTION AND OVERVIEW

The purpose of this handbook is to provide to students, the college community, and the general public essential information about the educational and behavioral performance requirements expected of individuals entering the health professions. In order to ensure safe practice, DHS has developed specific policies and procedures, in addition to those already established by the College, that govern student matriculation in their respective programs. **It is the responsibility of the student to be familiar with and abide by the policies contained in this manual and in the College Catalog and Student Handbook and Planner, which are referenced throughout this document.**

Each student is issued a copy of the Division of Health Sciences Student Handbook and Policy Manual after admission to their respective program. The content is subject to change. Program specific policy amendments, supplements and requirements are contained in the program addenda. At the beginning of each course, the faculty member(s) will distribute a course syllabus. Students should refer to the course syllabus for additional policies including but not limited to: attendance, assessment instruments, make-up requirements, and criteria for successful completion.

Admission to one of the programs offered in the Division of Health Sciences (DHS) is the first step toward entering an exciting, rewarding career. In order to be successful in any Health Sciences program, engagement in the educational process is essential. Becoming a caring, competent health care professional requires a major commitment of time, energy, and focus of one's efforts toward the needs of clients. This selfless dedication is what makes true professionals stand out. The faculty and administration in DHS are dedicated in their efforts to help students become professionals and meet their educational and career goals.

Clinical agencies, hospitals, and facilities providing education to students may have policies and procedures in addition to those in this handbook.

Division of Health Sciences Mission Statement and Overview

Mission

The mission of the Division of Health Sciences is to prepare graduates to provide professionally competent, safe, ethical, compassionate healthcare and become life-long learners in their field.

Philosophy

Administrators, faculty and staff within the Division of Health Sciences believe that education is a life-long endeavor where students are at the center of the learning continuum. Students ultimately become life-long learners when engaged in teaching and learning environments that help them to achieve their personal and professional goals. We believe that all students have the ability to learn. Students are encouraged to identify their preferred style of learning, determine strengths, and realize their potential. Students who develop the ability to think critically will be better equipped to learn new skills, acquire knowledge, and understand the attitudes and behaviors required to succeed in their field of study. Therefore, we believe the goal of the educational process is to teach for understanding and expand the view of the learner.

We believe that healthcare education requires a commitment to diversity, leadership, collaborative partnerships, and evidence-based practice. Accordingly, we are committed to a systematic review process to ensure programs maintain the highest standards and are reflective of current practice. All healthcare professional programs represent blend of theory and reflective clinical practice that embraces cross-cultural beliefs and values.

Graduates from the Division of Health Sciences have the ability to respond to healthcare needs within local, national, and global environments. All healthcare professionals have the responsibility to ensure that quality healthcare is provided by engaging in effective leadership and social advocacy initiatives.

Core Values

Aligned with the Core Values of the College, the Division of Health Sciences believes that:

- Quality education in all health programs is based on current standards of practice, use of technology, and application of contemporary pedagogy.
- Students have the potential for success when academic and personal support services are provided throughout the educational process.
- Communication and team work are an integral part of the learning and working environment.
- Appreciation of diversity becomes the foundation for understanding and embracing the richness of differences in opinion, ethnicity, culture, and lifestyle.
- Change is embraced by a willingness to accept new ideas.
- Education becomes a pathway that fosters lifelong learning.

Division of Health Science Goals:

1. Prepare students for employment in a specific health career field.
2. Maintain external accreditation/approval of individual health science programs.
3. Establish academic benchmarks that assess student learning.
4. Promote engagement in community service activities.
5. Utilize a systematic evaluation process to maintain the highest current standard of practice.

September 9, 2009; revised October 16, 2009; revised November 13, 2009; revised January 27, 2010, March 24, 2010; revised May 3, 2013

MassBay Community College does not discriminate on the basis of sex, religion, color, race, sexual orientation, age, national origin or disability in all of its educational programs, activities or employment policies, as required by Title IX of the 1972 Education Amendments and other federal and state anti-discrimination laws. MassBay makes a serious effort to represent a diverse group of students, faculty and staff, and to promote a climate of acceptance for minority groups.

If you have any questions about compliance with the Title IX, please contact the MassBay Community College Affirmative Action Officer in the Human Resources office at the Wellesley Hills Campus.

Division of Health Sciences Program Accrediting Agencies

Associate Degree Nursing

Accreditation Commission for Education in Nursing, Inc. (ACEN)
3343 Peachtree Road NE, Suite 850
Atlanta, GA 30326
www.acenursing.org
Phone: 404-975-5000

Massachusetts Board of Registration in Nursing (Approved)
239 Causeway Street, 5th Floor, Suite 500
Boston, MA 02114
www.mass.gov/dph/boards/rn
Phone: 1-800-414-0168 or 617-973-0900

Radiologic Technology

The Joint Review Committee On Education in Radiologic Technology (JRCERT)
20 North Wacker Drive, Suite 2850
Chicago, IL 60606-3182
www.jrcert.org
Phone: 312-704-5300

Emergency Medical Technician and Paramedicine

The Massachusetts Department of Public Health
Office of Emergency Medical Services (OEMS)
99 Chauncy Street, 11th Floor
Boston, MA 02111
<http://www.mass.gov/dph/oems>
Phone: 617-753-7300

Surgical Technology

Accreditation Review Council on Education in Surgical Technology and Surgical Assisting
(ARC/STSA®)
W. Dry Creek Circle, Suite #110
Littleton, CO 80120
www.arcstsa.org
Phone: 303-694-9262

The Commission for Accreditation of Allied Health Education Programs (CAAHEP)
1361 Park Street
Clearwater, FL 33756
www.caahep.org Phone: 727-210-2350

Practical Nursing

Massachusetts Board of Registration in Nursing (Approved)
239 Causeway Street, 5th Floor, Suite 500
Boston, MA 02114
www.mass.gov/dph/boards/rn; Phone: 1-800-414-0168 or 617-973-0900

SECTION II: Division of Health Sciences Policies

Section A: Academic Policies

A.1.0 Attendance

It is important to your academic success that you attend all classes in which you are enrolled and make up any work due to absences. For each course, your instructor will establish policies regarding class, clinical, and/or laboratory absences, and make-ups (if any), and will include these policies in the course syllabus. Your course instructor has full and final authority to allow make-up work and/or absences. If you miss more than five (5) class hours, your instructor has the right to withdraw you from the course by notifying the Registrar. Frequent tardiness and absenteeism is not tolerated in the health care professions or by the DHS faculty.

As a student in a Health Sciences program at MassBay, you must follow policies that have been developed to meet the requirements of the appropriate accrediting agencies. To ensure your successful completion of the program and accreditation requirements, attendance in all health programs is mandatory for classes, laboratory sessions, and clinical rotations.

If you have clinical clock hour requirements, you should speak with your instructors about class and clinical attendance policies. Absences may be cause for program withdrawal. Students who demonstrate a pattern of tardiness or absence will receive a counseling notice regarding the attendance policy.

NOTE: When taking courses in other Academic Divisions you are to follow the attendance policy set forth by that Division's faculty.

A.2.0 Student Progress

Students are advised that it is important to purchase the required textbooks and read all assigned chapters to be successful. Textbooks contain copy written material, and photocopying it is illegal.

To be considered in "good standing" within any of the DHS programs, students are required to achieve a minimum grade of 73% (C) in each Health Sciences Program course, except for Practical Nursing (PN) courses where the passing grade is a 75% (C), and the EMT and Paramedicine courses where the passing course grade is 77 % (C+). In science courses with a BI or CH prefix the passing grade is 73% (C). Students must pass all segments of courses (theory, laboratory, and/or clinical) in order to be successful in that specific health course.

Students whose grade is below the minimum required for courses in theory, clinical or laboratory courses at mid semester will receive a midterm warning consistent with the College's policy. Students who receive a midterm warning are required to make an appointment with the faculty responsible for the course to develop a learning remediation plan.

Students must successfully complete all required prerequisite and co-requisite courses to continue in a Health Sciences program. It is the professional responsibility of each student to insure adequate preparation for all program, course, lab, practicum and/or clinical requirements.

Incomplete Grades: Should a student not complete all course requirements within the last two weeks of the semester but provides evidence of making significant progress toward such completion, he or she may submit a written request to the Health Sciences instructor to receive an incomplete (I) grade. In each case in which an Incomplete is requested, the circumstances must be compelling and beyond the control of the student. The Incomplete will not be awarded in cases of neglect on the part of the student nor will it be given as a substitute for a failing grade. At the instructor's discretion, the "I" grade may or may not be awarded.

Incomplete grades may be given only in the following circumstances:

- The student must be in good academic standing in class, laboratory, and clinical;
- Attendance has been satisfactory;
- Illness, accident, or other extenuating circumstances prevent the completion of required work;
- Documentation has been provided by the faculty;
- Required work may reasonably be completed in an agreed-upon time frame, no later than the beginning of the next semester.

Instruction to Students:

To request an Incomplete grade, complete section I of the "Request form" and submit it, along with forwarding documentation, to your instructor. A copy of this form is included on page 34.

The instructor will specify the terms and conditions for making up the coursework in section II of the request form. Signed forms will be sent to the Dean for approval. The Dean will forward all approved forms to the Registrar for processing.

When the coursework is completed and with the Dean's approval, the instructor will submit a "Change of Grade Form" to the Registrar's Office.

If the "I" grade is granted, conditions for completion of course requirements will be stipulated in a written agreement to be signed by the instructor, the student, and Dean of the Division prior to the start of the next course in the program sequence. Students who do not resolve their incomplete grade will receive an 'F' and will not progress in the program.

A.3.0 Testing Policy

The specific testing policy for courses is found in the syllabus for each course. Any appeal of score/grade on an examination must be submitted in writing to the instructor within one week of the administration of the test. If a student must leave the room during the test, all test materials must be returned by the student to the testing proctor prior to leaving the testing room. Failure to comply with this stipulation may result in a failing grade for the test.

Test Review

Tests or exams may be considered “Secured” and will not be given to the student to keep after the exam is completed. These tests will be kept on file in the appropriate program office. Specific Health Sciences programs have test review policies. If a test review is permitted, it will be monitored by course faculty.

Make-up Exams

Students are expected to be present for all exams. The faculty recognizes that illness and emergencies occur and may, at their discretion, allow the student to take a make-up test / exam. Students must notify the faculty prior to the exam time and provide reasons and documentation for the absence. The student must contact the primary course instructor on the day he/she returns to request a makeup exam and, if approved, arrange for an exam date. Faculty have the right to ask for documentation verifying the illness or emergency as part of their decision process to allow or deny a retest. A different examination will be administered.

During exams, the following rules apply:

1. All books, purses, tote bags, cell phones and other electronic devices, etc., will be placed in a designated area and remain there during the exam.
2. Dictionaries of any kind may not be used during an examination.
3. The student’s name must be recorded on all test materials and Scantron forms as appropriate.
4. If a Scantron form is used, any erasures must be thorough for accurate scanning.
5. If a test review is offered, exam papers must be returned to faculty afterwards.

A.4.0 Performance Notification Process

Students who are not performing satisfactorily in any laboratory or clinical setting will receive a performance notification. The performance notification form can be found on page 37 of this handbook. The instructor will use the clinical objectives or competencies to determine the areas of weakness and what remediation is needed to become compliant in meeting student learning outcomes. Repeated performance notification may lead to a failing grade. Students are expected to complete all learning outcomes by the end of the course. Infractions of the policies, performance codes or inadequate levels of academic/clinical performance may be communicated to the student through the written warning. Record of such written warning shall be entered into the student’s file.

A.5.0 Student Grievance Procedure

The student grievance procedure is described in the current MassBay Community College [Student Handbook](#).

A.6.0 Grade Appeals

The first step in the grade appeal process is to contact the faculty member in writing, within 30 calendar days following the last day of the instructional period, stating that you would like a review of course grades. Grade appeals are to determine if there are any mathematical errors in computing the final course grade.

The student grade appeal process is described in the current MassBay Community College [Student Handbook](#).

Section B: Readmission and Appeal of Dismissal Policies

B.1.0 Readmission Policy

Students who have been dismissed or who have withdrawn from any program within the Division of Health Sciences at MassBay Community College will be considered only once for readmission to the same program. Students who have not been successful in one health science program can apply for admission to a different health program if they have an overall College GPA of 2.0 or better. Students who have been dismissed or withdrawn from a program for reasons of “clinically unsafe practice/behavior” as defined in the DHS Student Handbook and Policy Manual (see **E.14.0**) or who violate the College’s Student Code of Conduct are not eligible for admission/readmission to any DHS program. **See program addendums for specific requirements for admission/readmission.**

Application for readmission must be made within 12 months of withdrawal or dismissal from the original program. Readmission application deadlines are February 1 for the fall semester and June 1 for the spring semester. Qualified candidates will be selected from a readmission pool and based on the seat availability for that course and/or program.

Based on specific course/program requirements and accreditation standards, students may be required to retake courses, take competency exams or skill testing prior to readmission, even if courses have been completed successfully. Should the student not attain a passing grade on skill or competency testing, they will be required to retake course(s) in its entirety.

B.2.0 Medical Leave Policy

Students who leave a course mid-semester with verified medical or family illness documentation will be withdrawn from the course but not the restricted health science program. Students who are granted a medical or family leave will be accommodated in the subsequent offering of that course, after first providing medical documentation approving their participation. Students will have 12 months to be re-instated in the withdrawn course for medical reasons. If additional time is required, the student will be withdrawn from the health science program and if eligible, provided the process for readmission. Students coming back from medical leave will be required to pay tuition for all enrolled courses. Students are only eligible for medical leave during a semester. Medical leaves will not be granted once the course is completed and/or grades have been issued.

B.3.0 Grounds for Immediate Dismissal without the Option for Readmission to Any Health Program.

Demonstration of any of the following actions or behavior is grounds for immediate dismissal from a Division of Health Sciences program without the option for readmission:

1. Behavior that threatens the health and safety of clients, students, faculty, or college staff.
2. Academic dishonesty or plagiarism.
3. Impairment due to alcohol or drugs.
4. Behavior or actions that engage in or condone discrimination on the basis of race, gender, age, citizenship, religion, national origin, sexual orientation, or disability.
5. Violation(s) of client (HIPPA policies), student confidentiality (FERPA policies) or

sharing any information that relates in any way to the proprietary interests of a clinical agency (e.g. photographs, videos, audio recording, policies, financial, security or general operational information/procedures).

6. Behavior that is incompatible with legal and ethical standards established by the discipline or profession the program represents.
7. Patient/client abandonment.

If the cause for dismissal in one of the categories listed above is also a violation of the College's Code of Conduct, the student name will be sent forward to the Code of Conduct Officer (CCO) in the Office of the Dean of Students.

B.4.0 Appeal of Dismissal from Division of Health Sciences Programs

A student has the right to appeal a dismissal from an Allied Health or Nursing program related to academic or affective domain infractions as outlined in the Division of Health Sciences Student Handbook, appropriate program addendum, and/or course syllabus should the student believe they were unfairly dismissed.

The following information outlines the appeal process accordingly.

Students have ten (10) calendar days from the date on the dismissal letter to appeal the decision.

Step 1

The student must submit, in writing, reason(s) why he or she believes the decision was unfair, reason(s) why the student should be reinstated, and any additional information or documentation that would support the appeal. The information will be sent to the Dean, Division of Health Sciences.

Step 2

A committee of designated College representatives will meet to determine the merits of the student's request to overturn the dismissal and for reinstatement into to the appropriate Allied Health or Nursing program.

Step 3

A letter will be sent to the student in question regarding the decision. The decision of the committee is final.

The Appeals Committee will include three Division of Health Sciences faculty members, and the Dean of Health Sciences. Alternate members may be added as appropriate.

Section C: Professional Behavior

C.1.0 Division of Health Sciences Code of Student Conduct: Professional Integrity / Behavior Policy & Affective Domain Standards

The Division of Health Sciences Faculty has identified criteria for professional performance under the standards of affective domain. Faculty has a legal and ethical obligation to inform students of behaviors that are inconsistent with these standards and to take action to ensure that any inconsistency is acknowledged and corrected by the student. Students are responsible for integrating an understanding of professional and ethical standards associated with their discipline in order to meet the criteria identified below (see standard 7 below). Faculty have the right and the responsibility to apply reasonable judgment to determine if a standard has or has not been met.

Standard 1: Accountability

Students demonstrating accountability exhibit a willingness to accept responsibility for one's their own actions and the consequences of their behavior.

Rationale: Within the health care disciplines, standards and expectations are defined by professional organizations and governing bodies. The burden of adhering to these standards lies with the individual who has opted to pursue a career in the health care field. As learners and novice practitioners, students do not have the authority or expertise to challenge standards, expect that their own interpretations will be considered or determine what is important and what is not.

The student is expected to satisfactorily complete all assigned duties within the time frame established by faculty, staff and administrators. This includes showing up for class, lab, clinical and meetings on time, following instructions and directives and being cognizant of variables that may require a shift in behavior or attitudes. When faculty provides feedback or institutes corrective action for failure to meet expectations or adhere to standards, the student is expected to accept the consequences of the behavior and take constructive, corrective action.

Students who shift blame, split faculty or college staff (go from one faculty to the next in an effort to elicit a desirable response), rely on others to meet all of their needs, refuse to acknowledge or accept their responsibilities as a student or healthcare professional and/or consistently demonstrate a lack of awareness of what is expected of them they have violated the standard for accountability and will be issued an affective domain warning.

Standard 2: Adaptability/Flexibility

The student demonstrates the ready capacity to adapt to new, different or changing requirements or circumstances positively and constructively.

Rationale: Health care systems require professionals who are prepared for change and ambiguity

and are able manage the shifting demands positively and constructively. Variables that drive change include the need for continuous improvement, advances in science and technology, economic and political factors, sociocultural factors, and the limitations of educational and healthcare systems.

Students who fail to manage change, engage in repeated patterns of seeking assignments and schedules that meet their individual or group needs and/or engage in negativity or the inability to adapt and adjust to shifting demands have violated the standard for adaptability and flexibility will be issued an affective domain.

Standard 2: Assertiveness/ Effective Communication

The student integrates an understanding of respect and accountability to express concerns and needs effectively.

Rationale: Assertiveness and effective communication is necessarily to function effectively in the context of healthcare teams. Quality care depends on healthcare professionals who can undertake careful analysis of priority needs, convey those needs clearly and directly, work toward mutual understanding and participate in appropriate action.

Assertiveness should not be confused with aggressive communication in which individuals attempt to exert power over or intimidate others through words and gestures. It is also not consistent with passive-aggressive communication where the individual attempts to assert their needs or rights indirectly through covert or manipulative behaviors. Students who engage in aggressive, nonproductive or destructive communication or who demonstrate a persistent pattern of conveying needs inappropriately will receive an affective domain warning for this standard.

Standard 3: Compassion and Empathy

The student who demonstrates compassion and empathy views situations from the perspective of the other person and takes appropriate actions to preserve the dignity and worth of others.

Rationale: Healthcare requires committed individuals who are willing to step out of the confines of their own needs and experiences. The primary outcome of all actions is the provision of safe, effective care. Faculty, staff and administrators are focused on educational practices that ensure the preparation of individuals who will ultimately serve to meet patient needs. The individual needs of the health student are secondary to these essential legal and ethical obligations.

Student behaviors that may result in the student receiving an affective domain for failure to demonstrate compassion and empathy and include but are not limited to persistent attempts to put the needs of oneself above others, failure to recognize and respond to vulnerability, pain and suffering, failure to recognize resource limitations, failure to acknowledge or respect personal or professional boundaries and the inability to make the necessary sacrifices required to carry out caring behaviors.

Standard 4: Diligence and Dependability

Individuals demonstrating diligence and dependability demonstrate a strong work ethic, persistence toward positive outcomes and consistency in the performance of all duties and responsibilities.

Rationale: Goal orientation and reliability is essential in quality healthcare systems. Diligent and dependable healthcare professionals must maintain focus on proficiency and system effectiveness in order to meet patient needs.

Students who are repeatedly tardy or absent, fail to carry through with assigned duties and responsibilities (class, lab, clinical and other college obligations) and/or shift the burden of their problems or shortcomings onto others or engage in any other behaviors that suggest they are not dependable or diligent will receive an affective domain warning for this standard.

Standard 5: Honesty and Integrity

Individuals demonstrating honesty and integrity demonstrate truthfulness and accuracy in all actions, conduct themselves in a fair and ethical manner, and work to continuously uphold the values of the profession and/or the discipline they are affiliated with.

Rational: Failure to maintain honesty and integrity in all actions can significantly impact the individual's ability to provide safe, effective care. Public trust in the honesty and integrity of persons providing healthcare services is paramount. Patterns of dishonesty and lack of integrity that are observed outside of the clinical setting alert faculty to the risk that these behaviors and attitudes will continue in patient care domains.

Students who engage in any dishonest or fraudulent actions, or who act in a manner that undermines public trust in the profession or the educational system that prepares them, have violated the standard for honesty and integrity. Even if the student does not personally engage in dishonest behavior, they may be accountable for withholding information that compromises the safety or reputation of anyone in the college or clinical setting. Examples of violations include, but are not limited to, taking credit for another person's actions, falsifying documentation, failure to admit when they do not know something, carrying out actions that exceed the student's knowledge or ability, carrying out interventions without the supervision of a clinical instructor or preceptor, spreading rumors, falsely representing others and/or acting in a manner that diminishes or threatens to diminish the reputation of others. Nothing in this standard negates the policy for academic dishonesty, which will result in immediate dismissal from the program.

Standard 6: Respect

Individuals who meet this standard exhibit esteem and deference to other persons or entities that reflects awareness of accepted cultural and social norms.

Rationale: Respect is essential to the development and maintenance of the essential partnerships

required to provide safe effective care to individuals across healthcare settings. Respectful behavior relates to all other standards identified within this domain.

Individuals who do not meet this standard engage in a variety of behaviors that are inconsistent with membership in academic and healthcare communities. Examples include but are not limited to expecting others to adopt your own values, culture or beliefs onto others, failure to defer to persons in authority, failure to address others properly, failure to maintain the privacy of others, entitlement, failure to adhere to the chain of command, disruptive behavior in class, clinical, lab and meetings with faculty, challenging behavior, the use of nonverbal gestures or mannerisms that convey disrespect (e.g. tone, volume, violating personal space, eye rolling) and/or any image or representation of self or others that lacks awareness of social and cultural norms appropriate to the situation.

Standard 7: Other Standards Specific to the Discipline

In addition to all of the standards outlined above, students are responsible for adhering to the codes of ethics/conduct maintained by the profession or discipline they are preparing to enter. Please refer to the addendum specific to your program to find information on where to access these standards. Faculty will exercise best judgment in determining if these violations will result in a warning or constitute egregious actions that necessitate withdrawal from the program.

Each program will assess individual students for any or all of those behaviors listed above. If a student does not demonstrate these behaviors at appropriate levels in all domains it may negatively affect his or her grade and/or ability to complete the program.

C.1.1 Affective Domain Standards of Performance Violation Policies

Should faculty determine that a student's behavior violates one or more of the affective domain standards, an affective domain warning will be issued to the student. Upon discovery of the violation, faculty has up to one week to determine the best process for issuing the warning and notifying the student. In certain instances, the student may be withheld from clinical until the process is carried out and the student completes corrective action. Once a student is notified that they will be receiving an affective domain, the student has 48 hours to meet with the faculty.

The student will meet with faculty and be provided with the opportunity to review a written summary explaining the nature of the violation, any remedial action that is required and the implications for the student. Limited time will be provided for the student to address their concerns. A copy of the affective domain will go to the chair and will become part of the student's permanent record. Any affective domain violation may impact the student's ability to seek readmission, serve as a student representative or receive a favorable recommendation for professional or educational purposes.

Students may receive a maximum of two affective domain violations. A third affective domain

violation constitutes grounds for dismissal from a Health Sciences program. Exceptions include instances where the student refuses to take corrective action, when the warning identifies multiple violations of standards and/or when the precipitating behavior or response is egregious (e.g. reckless, threatening, abusive or illegal). If in any case the violation may result in the dismissal of the student, a faculty committee will convene to review the situation.

Students always have the right to appeal any disciplinary action through the grievance process outlined in the college catalog and student handbook.

C.2.0 Cell Phone Policy

In keeping with the “respect” affective domain above (Standard 6), the Division of Health Sciences adheres to the following policy regarding usage of cell phones during class time:

- Cell phones will be off during all class and lab time.
- Students and instructors will not make or receive cell phone calls during class and lab time.
- Students and instructors will not send or receive text messages during class and lab time.

In the case of an emergency where it is *vital* that the student or instructor keep a cell phone turned on, it should be in vibrate mode, and should be answered outside of the classroom or lab. *It is the student’s responsibility to notify the instructor before the start of class that an emergency call is due and that the student’s cell phone will be on. It is the instructor’s responsibility to notify the students of this situation before the start of class that an emergency call is due and that the instructor’s cell phone will be on.*

Texting, sexting, gaming, or use of a cell phone for any purpose during a class or lab other than for an emergency situation as stated above, will result in the student being asked to leave the class or lab for the remainder of class/lab time. The student is responsible for the material missed as well as for making up the time missed in class/lab. In addition, the student will receive a written warning indicating that the affective domain competency was not met.

C.3.0 Social Media/ Electronic Communication Policy

For the purposes of this policy, social media/ electronic communication is defined as the use of email, electronic images, blogs, networking sites, applications, chat rooms, forums, video sites and other platforms. This policy applies to information posted in private or protected sites that can be accessed or shared by other users.

Faculty recognize that the use of social media as a means to communicate has become commonplace. The implications for healthcare providers and healthcare students are serious. The accessibility and efficiency of technology makes it easy to post content or images without considering the proprietary, confidential or professional implications of such behavior.

The DHS holds the health science student to the highest standards for the responsible use of social media and electronic communication. Standards have been established that are aligned with the professional and ethical codes of each discipline.

The following behaviors are considered grounds for dismissal:

- The use of social media to make disparaging remarks about other students, faculty, staff or patients, the division, individual departments or clinical affiliates/partners and associated individuals and communities- even if nicknames or codes are used and/or identifying information appears to have been removed.
- The posting, distribution or dissemination of patient, student, facility, laboratory or classroom images or associated content (please note: taking pictures, videos or audio recordings in the classroom or clinical agency is strictly prohibited without the permission of all parties involved).
- The posting of any content or images that could in any way compromise the safety, reputation and/or professional image of the Health Sciences Department, staff, faculty or students.
- The posting of any content or images that could in any way compromise the safety, reputation and/or professional image of clinical affiliates, partners, communities or individuals associated with the Division of Health Sciences or its departments.
- Posting inappropriate, suggestive, abusive, violent, potentially threatening, derogatory or discriminatory content in networks, forums or platforms while identifying oneself as a student within the Health Sciences Division. Note: Identification as a Division of Health Sciences student can be established by both statements and images used in electronic and social media sites (e.g. wearing a uniform or posting a college, division or department logo).
- The use of any electronic communication or applications for the purpose of distributing or disseminating information that could be used to commit acts of academic dishonesty or fraud.
- The use of any electronic communication or applications to share or distribute proprietary academic or facility information including, but not limited to, policies, procedures or patient care tools.

Students are encouraged to view the following sites for tips for the responsible use of social media by healthcare professionals. Please note that nothing in these documents negates the policies established by the Division of Health Sciences.

<http://www.nursingworld.org/FunctionalMenuCategories/AboutANA/Social-Media/Social->

[Networking-Principles-Toolkit.aspx](#)

<https://www.ncsbn.org/2930.htm>

C.4.0 Snow/Weather Emergency Policy

If the College closes due to inclement weather or for any other reasons, all classes, clinical, and laboratory classes are cancelled. The student handbook and the College website (www.massbay.edu) provide information regarding the various communications methods used by the College to notify everyone about the closure of the College and course cancellations.

Students are expected to attend their regularly scheduled classes, clinical and practicum when the College is open and no official announcement has been made to close the College or cancel classes.

Students who believe that conditions are unsafe for travel to class or clinical/practicum must call their instructor and the clinical agency to explain why they are not able to attend the regularly scheduled class or clinical/practicum.

If a student and faculty member arrive at a clinical site before the school closing is announced, students and faculty will remain at the clinical site until the closing is announced. Students will be expected to leave the agency, as soon as it is feasible to do so, after the closing announcement is made. Any student who is in a preceptor clinical experience will be notified of the College closure by each program Clinical Coordinator and/or Department Chair.

If the closing announcement occurs while students are reroute to classes and arrive as the College is closing, students will be expected to return home without attending any classes. Cancellations that occur while classes are in session, students and faculty will be expected to leave the campus as soon as possible after the announcement.

Make-up classes and clinical may occur at the discretion of each specific program within the Division of Health Sciences if the College had to close.

Section D: Health and Immunization Requirements

Complete immunization and other required documentation are necessary for participation in a Health Sciences program. All immunization and CPR documentation is managed by Castle Branch, a secure, web-based platform. Students will receive instructions on how to create a personal profile called a “My CB Account” on www.castlebranch.com and upload their immunization and CPR documentation. Castle Branch will send the student email “alerts” when documentation is missing, incomplete, or in need of updating. The Division of Health Sciences faculty will refer to My CB data to determine whether a student is cleared for clinical. The following items are required by your selected program’s due date or within 30 days of the first day of the semester* (see *Division of Health Sciences Program Grid* on [page 49](#)). **Failure to submit all of the forms below on time and in the proper format will jeopardize the student’s place in his/her program. Jeopardize means the student will not be allowed to start the program or will have to withdraw if they have started the program and documents are found to not meet submittal or compliance requirements.**

Immunizations:

Hepatitis-B – One of the following is required: EITHER 3 vaccinations (0, one month, and five months) AND positive antibody titer (lab report or physician verification of results required) OR a positive antibody titer (lab report or physician verification of results required) OR documentation from a Healthcare Professional stating that you are a 'Non-Responder' to the vaccine. If series is complete but you still need a titer, submit your 3 vaccines and a new alert will be created for you to complete the titer. If the titer is negative or equivocal, new alerts will be created for you to receive 1 booster shot and provide a 2nd titer. If the 2nd titer results are negative or equivocal, you will be prompted to finish the series started with your booster shot and provide a 3rd Titer Result. If the 3rd titer result is negative or equivocal, you will be listed as a 'Non-Responder' to the Hepatitis B Vaccine. You must allow a minimum of 6 months to complete the series.

2-Step TB/PPD Skin Test or Chest X-Ray or QuantiFERON-TB or T-Spot - An initial 2-Step TB screening or negative Chest X-Ray is due by the published deadline for your program. This process for the 2-Step TB must be followed:

Step I: PPD (Purified Protein Derivative) “implant” is injected into the forearm. In 2 - 3 days, this implant must then be “read” as negative and documented by a clinician.

Step II: Within 3 weeks of completing Step I, students are required to return to the clinician’s office for a second “implant.” Again, the student is required to return in 2 - 3 days to have this implant read and documented as negative by the provider.

Once students have completed Steps I and II, only a single TB implant is required annually and must be updated each year to meet medical compliance.

If you have a positive TB/PPD result, submit documentation of a clear (negative) Chest X-ray. A negative symptom review check by a health care provider is required annually thereafter.

Tetanus & Diphtheria (Td) or Tetanus/Diphtheria/acellular Pertussis (Tdap) - Documentation of a Tdap within the past 10 years or a Td booster within the past 2 years is required.

Measles, Mumps, Rubella (MMR) 2-Dose Vaccine or Titers* - There must be documentation of either a positive antibody titer for all 3 components OR documentation of each vaccination. If titer is negative or equivocal, 1 booster plus a new titer is required.

Varicella 2-Dose Vaccine or Titer* - There must be documentation of either a positive antibody titer for Varicella OR documentation of vaccination. If titer is negative or equivocal, 1 booster plus a new titer is required.

Seasonal Influenza Vaccine (when available) – Submit documentation of a flu shot administered during the current flu season OR a declination waiver. It is highly recommended to take the Flu vaccination as early as possible, but not later than October 31st. Students who cannot be immunized for the flu may be required to wear a mask in clinical settings.

Report of Physical Examination & Immunization Record - This requires the student’s signature authorizing the release of immunization information to clinical affiliating agencies. It also requires your physician to fill in confirmation of immunizations you’ve received and your physical exam results within the past year.

** Titers are laboratory blood tests to determine immunity to specific diseases. They are not immunizations.*

Some clinical facilities where students will be assigned may require additional information and/or screenings prior to clinical placement. Examples include submission of social security number; Finger-printing; Drug-testing; CORI checks; CNA Registry Check, and additional immunizations.

Additional Notes: Students who have previously taken the required MMR, Varicella, and Hepatitis B vaccines discussed above but who are unable to produce acceptable documentation, must have titers drawn. Students who refuse to be vaccinated due to religious or medical reasons may be in jeopardy of losing their seat in the respective program, as most clinical agencies will not allow unvaccinated students to participate in direct patient care. Some clinical facilities where students will be assigned may require additional information and/or screenings prior to clinical placement.

Other Related Requirements:

CPR Certification – The CPR certifications that are acceptable for health students are the “BLS for the Health Care Provider” from the American Heart Association (AHA), and the American Red Cross or the equivalent from the American Military Training Network. The copy must be front & back of the card and it has to be signed.

Technical Standards - Students must meet certain physical demands of performance so that they can successfully progress in their course work and ultimately graduate. This form is completed and signed by the student.

National Background Check – A national county records search is also conducted through Castlebranch.com.

CORI and SORI forms –The student must complete the CORI (Criminal Offender Record Information) form to authorize a search of conviction and pending criminal case information under

Standard Required Level I by the DCJIS (Department of Criminal Justice Information Services). As required, the student must provide the last six digits of their social security number on the CORI form and present a valid government issued ID (such as a license or passport) to verifying staff. The student must also complete the SORI (Sex Offender Registry Information) form. The CORI and SORI completion process will occur prior to the beginning of clinical/practicum experiences. If a student is late or is absent the day the CORI/SORI check is completed, it is his/her responsibility to complete and CORI and SORI request forms at the Division of Health Sciences Administrative Office. The Division of Health Sciences may conduct subsequent CORI checks within one year of the date the form was signed by the student. The Division of Health Sciences will first provide the student of written notice of the check. The student may also be required to complete subsequent CORI and SORI request forms according to clinical facility requirements. If a CORI and/or SORI Report is returned with a finding(s), it may or may not prohibit progression in a Health Sciences Program. CORI and/or SORI finding(s) will be forwarded to a College-wide Review Committee and the student will be invited to the review session. The final decision regarding the student's progression in a Health Sciences program will be determined at that time.

**30-Day Grace Period: Massachusetts Law states that students subject to 105 CMR 220.600 (Immunization Requirements for Post-Secondary Students) may have a 30-day grace period after enrolling before all required immunization records must be submitted. Upon entering a Health Sciences program, students may also have a 30-day grace period from the start of the semester before being subject to withdrawal from their program provided this does not interfere with the start of a required clinical rotation. If a program's clinical rotation starts sooner than 30 days, students in that clinical course must comply with the Division of Health Sciences' published deadlines in order to meet the standards of the clinical sites and begin their rotation on time. If the student does not have all records submitted and in the proper format by published deadlines or by the end of the 30-day grace period, whichever applies, he or she may be withdrawn from the program.*

Section E: Clinical/Practicum Policies

Introduction & Definitions

The purpose of this section is to present those policies and procedures which are most relevant to the clinical/practicum component of the programs. **The information contained in this handbook is subject to revision. Students will be given written notice of any amendments or revisions.**

The policies and practices are in addition to those stipulated in official College publications, the didactic policies portion of this handbook, and specific program course syllabi. **It is the policy of the College to reserve the right to add, withdraw, or revise any provision or requirement.**

To promote understanding of the scope of this handbook, the terms clinical, clinical fieldwork, clinical affiliations, and clinical rotations are used interchangeably and refer to the required clinical experiences of each of the programs.

Terms used for the various individuals involved with clinical education in the Health Programs include:

- **Clinical Instructor:** This term refers to any person recognized by the program as having the responsibility to supervise and assess the performance of any student while on clinical. This term is used interchangeably with **Clinical Supervisor, Clinical Faculty, Faculty and/or Clinical Preceptor**. Either the college or the clinical site may employ the individual with this title, dependent upon the program.
- **Clinical Coordinator (CC):** This term refers to the college faculty member responsible for securing and/or assigning clinical placements, and for assessing the student's clinical performance. Other terms used to describe this individual include: **Academic Fieldwork Coordinator (AFC), and Clinical Coordinator (CC)**. In the case of the ADN and PN programs the CC is the Program Chair.
- **Center Coordinator for Clinical Education (CCCE):** This term refers to the person employed by the clinical site whose responsibility it is to coordinate and supervise the clinical program at each site. Other terms used to describe this individual include: **Clinical Site Supervisor (CSS) and/or Clinical Instructor (CI)**.
- **Preceptor:** This term refers to the person on staff at clinical facility who supervises and instructs students in clinical experiences.

Individual clinical sites may use different titles for those serving in the above positions within their institution. Refer to program appendices for this information.

The clinical experience(s) is integrated within the overall program requirements. It provides practical experiences that augment laboratory and classroom learning and facilitates the transition from student to health care practitioner.

E.1.0 Professionalism

The student will adhere to all accepted standards, policies, procedures, rules and regulations of the College, DHS, the program, the clinical site, and his/her profession's code of conduct. The student's performance and behavior must be safe and appropriate at all times. **Refer to the Professionalism and Affective Domain Standards and the program appendices for professional codes of conduct specific to each program/profession.**

E.2.0 Confidentiality

Of equal importance to the confidentiality of student records is the unequivocal requirement to preserve the confidentiality of any and all patient / client medical information. It is the moral, ethical and legal responsibility of health professionals, and DHS students to insure that any and all medically related information is held in confidence. Client information should only be shared with appropriate clinical personnel within the context of that personnel's need to know for delivery of quality care. Students are required to adhere to any and all such policies while in the clinical environment. All students will receive from the College patient privacy training (HIPPA) prior to clinical.

E.3.0 Health Status

It is the student's responsibility to insure that completed physical exam and immunization records are submitted to and approved by Castle Branch. (See Section D. Health and Immunization Requirements.) Failure to submit this information and other required documentation could affect clinical placement and ability to complete a Health Sciences program. Health forms are available on the MassBay Community College website.

Should the student's health status change in a manner that would restrict clinical participation after he/she has health clearance and has matriculated in a DHS program, he/she **MUST** immediately notify the Department Chair. The student must also submit to the CC a note from his/her primary care provider indicating the nature of the restriction and the date at which the restriction(s) must be imposed. To re-enter the clinical environment, the student must submit a note from his/her primary care provider to the CC affirming the removal of restrictions and the date at which the student can resume unrestricted participation in clinical activities. If a student is unable to resume his/her participation in the program, he/she should refer to the Division of Health Sciences' Medical Leave Policy (Section B.2).

E.4.0 Communicable Disease Statement

Students have an ethical and legal responsibility to maintain a high standard of health. When providing care, the student should routinely and without discrimination take all precautions against exposure and transmission of communicable diseases consistent with the policies and procedures of the clinical site. The DHS student who has a communicable disease must inform the CC and appropriate clinical instructor. Should there be any questions as to potential restrictions or

precautions relating to clinical participation, the student may be required to seek medical advice and documentation from his/her primary care provider.

E.5.0 Emergency Care

The College's contractual agreement with clinical agencies states that emergency care will be provided by the clinical facility if that facility maintains an emergency room. Furthermore, the agreement stipulates that the student will assume the cost of such emergent care. Therefore, students should refer to their health insurance policy for coverage in the event of an emergency in the clinical area.

E.6.0 Latex Sensitivity & Allergy Policy

Latex products are common in the medical environment. Allergic responses to latex can range from irritation and allergic contact dermatitis to the possibility of life-threatening anaphylactic shock. Guidelines have been established at MassBay Community College to provide information to potential allied health and nursing program applicants/students who are sensitive to latex.

Latex free environments are seldom available in either clinical or academic settings. Therefore, an individual with a latex allergy/sensitivity wearing alternative vinyl or nitrile gloves is still exposed to latex residue of others working in the area or to latex present in the equipment, models and mannequins. Although latex gloves are the most prominent source of latex allergen, many other products contain latex including, but not limited to:

- Blood pressure cuffs, medication vials, syringe connectors and wound drains;
- Stethoscopes, catheters, respirators, and goggles;
- Oral and nasal airways, surgical masks, and electrode pads;
- Endotracheal tubes, syringes, IV tubing, and tourniquets.

Any student who has or develops symptoms consistent with latex allergy/sensitivity is advised to consult a qualified allergist for evaluation prior to enrollment in the Division of Health Sciences. If a student is already admitted to a Health Science program he/she must consult a qualified allergist for evaluation of latex allergies should signs and symptoms develop. All such evaluations are at the student's expense. If it is determined that a student suffers from a latex sensitivity/allergy and the student desires an academic adjustment, including auxiliary aids or service, or reasonable accommodation due to this condition, the student must contact the College's Office of Disability Services.

As with all matters related to one's health, the utmost precautions should be taken by the student to reduce the risk of exposure and allergic reactions. This may include the carrying of an epi-pen by the individual or other precautions as advised by the student's health care provider. It is the responsibility of the student with a latex sensitivity to understand and acknowledge the risks associated with continued exposure to latex during a clinical education, fieldwork, and healthcare career, even when reasonable accommodations are made and to regularly consult with his/her health care provider.

In an effort to minimize the presence of latex in the Division lab facilities, MassBay Community College will provide latex-free and powder-free gloves in all College lab facilities. Should a

clinical agency site NOT provide latex-free gloves, the College will provide latex-free gloves for clinical use. Additionally, the College is taking the following steps to minimize latex in its lab facilities: 1) *replacement of all gloves in use by faculty and students with nitrile or vinyl gloves;* 2) *maintaining an inventory of products/equipment and supplies in each health science program that contain or could contain latex;* and 3) *future purchasing of latex-safe supplies and equipment whenever possible.*

As with all students in the Division of Health Sciences programs, a student with a latex sensitivity or allergy is required to satisfactorily complete all requirements and technical standards of the program to which they have been accepted.

E.7.0 Blood and Body Fluid Exposure Policy and Procedure **Occupational Exposure Guidelines**

According to the Centers for Disease Control and Prevention, the primary means of preventing occupational exposure to HIV and other blood borne pathogens is the strict adherence to infection control standards, with the assumption that the blood and other body fluids of all individuals is potentially infectious. The routine utilization of barrier precautions when anticipated contact with blood or body fluids, immediate washing of hands or other skin surfaces after contact with blood or body fluids, and careful handling/disposing of contaminated sharp instruments or other equipment during and after use is recommended.

For more information: <http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5409a1.htm>

Faculty & Student Responsibilities

1. Receive agency/unit orientation regarding infection control policy and post exposure management procedures.
2. Utilize appropriate barrier precautions during the administration of care to all individuals.
3. Utilize appropriate safety devices for the handling/disposing of contaminated sharp instruments or other equipment.
4. Immediately report accidental exposure to blood or body fluids.
5. Initiate immediate intervention of the management of accidental exposure to blood or body fluids.
6. Provide health education to individuals and groups regarding the prevention, transmission and treatment of HIV.

Accidental/Occupational Exposure Procedure

In the event of an accidental/occupational exposure to blood or body fluids, students and faculty should:

1. **Immediately** wash the area of exposure with soap and water.
2. **Immediately** report the incident to instructor and/or supervisory personnel.
3. Complete appropriate documentation according to agency standards and provide a copy of the report to the Division of Health Sciences department chair. Another copy will be kept in the student's file.

4. Complete the Division of Health Sciences' Incident Report. This form is included as an appendix in this handbook; this **must be completed within 24 hours of the incident.**

PLEASE NOTE:

1. Decisions regarding post-exposure management, prophylaxis, and follow-up will be at the discretion of individual and his/her health care provider.
2. The injured party will be financially responsible for emergency treatment, prophylaxis and follow-up care resulting from the incident.

E 8.0 Accommodation for Disability Conditions

DHS students who request accommodations in lecture, lab, or clinical due to a documented disability must inform the College Office of Disability Resources. The Office of Disability Resources, the Department Chair and the Academic Coordinator of Clinical Education will determine if the accommodations are appropriate and reasonable. This means that the accommodations do not compromise either the essential duties/student teaching responsibilities at the clinical/practicum site or the requirements of the program's competency based educational equivalents. (See Technical Performance Standards description and form in the Health and Immunization Requirements section of this Handbook.)

E 9.0 Clinical Sequence and Placement

- E.9.1 The CC or Program Chair determines the clinical placement of students. The primary consideration in arranging clinical placements is the academic integrity and value of the educational experience. A student shall not be placed at a site if he/she or an immediate relative volunteer or work in a department or unit within that site which is similar to his/her chosen field of study. When possible, advance notice will be given so that the student may make appropriate arrangements and clinical practicum sites may prepare for the student.
- E.9.2 Contacting and arranging for clinical affiliate placements is the purview of the Program Chair and/or CC. Students **shall not** contact a present or prospective clinical site without obtaining prior approval from the CC or Department Chair.

E.10.0 Transportation, Housing, and Parking Fees

The student is responsible for transportation to and from the clinical/student teaching sites as well as any parking fees. For programs with out-of-state clinical/student teaching sites, students are responsible for the cost of housing, transportation, meals, and other expenses unless otherwise provided.

E.11.0 Professional Appearance - Dress Code

While each program may have specific uniform requirements, all programs have the following expectations. The student must at all times:

- E.11.1. appear neat, clean, and well-groomed.
- E.11.2. maintain good personal hygiene.
- E.11.3. adopt a conservative approach to dressing, minimizing jewelry and cosmetic/ fragrances, not wearing clogs, open-toed shoes or sandals, nor extremely loose-fitting or tight clothing.

- E.11.4 wear MassBay student identification pin with name and his/her program of study.
- E.11.5 remove personal pagers and/or cell phones before entering the clinical site.
- E.11.6 limit body piercings to small, post-type earrings. Only one earring in each ear is permitted. No other body piercing jewelry is permitted in the clinical and laboratory settings.
- E.11.7 cover visible tattoos upon request in the clinical setting.
- E.11.8 keep fingernails short and clean. Clear nail polish may be worn. Artificial fingernails are not permitted.

Refer to individual program appendices for specific requirements.

E.12.0 Attendance

Attendance during the clinical affiliation is mandatory. Students are expected to report promptly consistent with the schedule of the site and clinical faculty. It is unacceptable to schedule personal appointments during clinical hours. Tardiness and early departures are also unacceptable. If a student for any reason misses more than one-quarter of the scheduled clinical/student teaching day, he/she will be considered absent for the whole day.

E.12.1 Should illness or any other reason prevent the student from reporting to the clinical facility on time, the student must notify his/her clinical instructor, CC, or appropriate College office at least 30 minutes before the scheduled start of the clinical day. Failure to notify either the clinical instructor or College of an absence is a serious breach of professional conduct.

E.12.2 If a student is ill and in danger of exceeding the attendance policy of his/her program, a note from his/her health care provider must be submitted to the Clinical Instructor at the affiliate and to the CC at the college. The student will not be permitted to resume the clinical experience without a note from the health care provider stating that the student is capable of resuming (without restriction) all activities associated with the clinical education component of the program.

E.12.3 Any clinical skill acquisition or experiences missed due to absence, tardiness, or early departure must be made up at the discretion of the clinical instructor, and approved by the CCCE and CC. The determination as to which alternative assignments and locations may be required to make up missed days/hours and/or substitute for any missed clinical skill acquisition or experiences will be made at the discretion of the clinical affiliate, CC, CI, and/or Dept. Chair at the College.

Refer to the appendices for individual program policies and/or syllabi.

E.13.0 Evaluation of Clinical Performance

Each program develops instruments and assessments used to evaluate student clinical performance. Refer to appendices for the clinical grading policies for the respective program. The CC /CI/Dept. Chair will issue grades consistent with the policy contained in the College catalog

and course syllabus. In most programs, clinical experiences are graded pass/fail. Grades Clinical grades below the programs specific minimum will result in withdrawal from the program. Refer to minimum grade chart include in section A2. Students who are having difficulty meeting the established learning objectives of the clinical experience are encouraged to seek prompt advice and/or assistance from the CCCE, CC, and /or the clinical instructor/faculty to develop a learning plan to address concerns.

E.13.1 Unsatisfactory clinical performance is defined as performance within the clinical environment which demonstrates:

E.13.1.1 consistent pattern of weakness in one or more clinical behaviors/skills objectives

E.13.1.2 failure to demonstrate progressive mastery of clinical behaviors and objectives

E.13.1.3 performance requiring more guidance and instruction than that required by other students at the same level.

If a student does not comply with the academic, professional, or clinical listed in this policy manual, or the MassBay Student Handbook, a DHS administrator or faculty will issue a written warning. The student must sign the warning. NOTE: **Signature on the warning** does not constitute the student's agreement with the content of the warning. Space is provided for the student to indicate his or her non-agreement and comments. The original signed copy of the written warning will be placed in the student's record and a copy will be given to the respective program chair. Should the student refuse to sign the form, the faculty will obtain a witness signature attesting that the notice was given to the student.

E.14.0 Clinically Unsafe Behavior

The following are examples of clinically unsafe behavior:

E.14.1 Any incident in which the student's action has or may seriously jeopardize patient care and/or safety. Examples such actions include, but are not limited to:

E.14.1.1 errors of omission/commission in patient care;

E.14.1.2 any pertinent intervention which places another in danger;

E.14.1.3 failure to report changes in patient status promptly;

E.14.1.4 acting outside of the legal and ethical role of the student as defined by professional standards;

E.14.1.5 abusive behavior;

E.14.1.6 not being accurate regarding any personal conditions that may jeopardize patient care or about the student's own learning needs;

E.14.1.7 repeated and/or consistently unsatisfactory clinical performance which compromises quality of care when the student also demonstrates one or more of the following:

E.14.1.7.1 multiple failed assignments, lab assessment scores or didactic average that falls below the acceptable standard set in the course syllabus.

When a faculty member determines that a student has been clinically unsafe,

1. the student will be immediately removed from clinical and lab settings.

2. the student will be notified immediately that they have been given an unsafe clinical grade and will not be permitted to return to clinical or lab. If the student is in another health course with a clinical component, the student will not be allowed to attend the clinical or lab unless the faculty member and department chair determine that patient safety is not at risk. Written notice by the faculty member will be given to the student documenting the reasons for the clinically unsafe determination.
3. the faculty will notify the department chair and appropriate academic administrator that a failure grade has been issued.

The grade submitted for the course where the unsafe clinical practice occurred will be an F. Any student who receives an F due to unsafe clinical practice will not be eligible for re-admittance to a health program. The student may appeal the unsafe clinical grade by following the Grade Appeal Process described in the MassBay Student Handbook.

E.15.0 Drug Screening Policy

All current students and those admitted into a Division of Health Sciences educational program may be required to provide proof of a negative nine-panel urine drug screening in order to be eligible for placement in a clinical rotation. Drug screening must be done at an approved testing site within 30 days before the start of a clinical rotation during each clinical semester. Clinical rotation start dates vary by program. Students taking prescription or over-the-counter medications should provide the testing facility with a list of these medications at the time of testing. All cost associated with drug testing is the responsibility of the student. Some health care facilities which provide clinical sites may also have policies on random and scheduled drug-screenings of students. Students must comply with clinical facility policies. If there is a positive drug result from the clinical, students may be withdrawn from the program.

Students who do not successfully complete this drug screening within the 30 day time frame will be withdrawn from the Division of Health Sciences program in which they are enrolled. All drug screening results will be sent to the Dean of Health Sciences in a confidential manner. Students will only be notified if their screening results are positive.

Students who do not pass the drug screening test the first time have the right to request a second drug screening at an approved testing site within the 30-day period prior to their clinical rotation. The student will be notified by the Dean of Health Sciences if the second test is positive. If the second drug test is negative, the student will be placed in a clinical rotation. If the second test is positive, the student will be withdrawn from a health program. The student can appeal to the Dean of Health Sciences for a hearing regarding withdrawal from a health program due to a positive drug screening test.

Any student who is withdrawn from a Division of Health Sciences program due to a positive drug test may reapply based on current College and Division of Health Sciences readmission policies.

Section III: Division of Health Sciences Forms

Division of Health Sciences Technical Standards Form

It is necessary for all Division of Health Sciences students to review and sign the following. **Please circle your program from the list below**, then sign and return as directed.

ADN Associate Degree Nursing	CPT Central Processing Technology
EMT Emergency Medical Technician	PM Paramedicine
NA Nursing Assistant	PN Practical Nursing
PB Phlebotomy	ST Surgical Technology
RT Radiologic Technology	

TECHNICAL PERFORMANCE STANDARDS		ADN	PN	PB	PM/EMT	NA	RT	ST/ CPT
MUSCULAR And SKELETAL	Work at areas located at various positions and elevation levels for durations of at least 30 minutes at a time alternating with the need to make frequent changes in body positions	X	X	X		X	X	
	Maintain a standing body position for a minimum of two hours, while performing work related functions	X	X	X		X		X
	Transfer and position movement dependent patients from / to various positions and surfaces, such transfer / positioning frequently requiring a minimum of a 50 lb. weight bearing load	X	X	X	X	X	X	X
	Move / push / pull / reach equipment and accessories of various weights and sizes from a variety of heights to a variety of heights	X	X	X	X	X	X	X
	Perform CPR on adults, infants, and toddlers	X	X	X	X	X	X	X
	Detect and distinguish between variations in human pulse, muscle spasm & contractions, and / or bony landmarks	X	X	X	X	X	X	
	Safely guide patient in ambulation on level as well as inclined surfaces and stairs, often while the patient is using a variety of assistive devices. In either case, guard patient against falls or other injury	X	X	X		X	X	
	Apply graduated manual resistance to patient's individual muscular actions in order to determine patient's strength or to apply exercise techniques for stretching or strengthening	X	X	X		X		
	Quickly move from one site to all other areas of the health care facility	X	X	X	X	X	X	
AUDITORY	Detect and appropriately respond to verbally generated directions and acoustically generated monitor signals, call bells, and vital sign instrumentation output	X	X	X	X	X	X	X
VISUAL	Detect and discriminate between various human gestures and non-verbal responses	X	X	X	X	X	X	X
	Detect and discriminate between large and small gradations in readings on dials, graphs, and displays, such detection made at various distances from the source.	X	X	X	X	X	X	X
	Read printed and computer screen manuscript text	X	X	X	X	X	X	X
	Discern a patient's physical status at distances in excess of 10 feet and in subdued lighting	X	X	X	X	X	X	

	Detect and discriminate between the range of image brightness values present on radiographic and computer screen images						X	
MANUAL DEXTERITY & FINE MOTOR SKILLS	Manipulate/adjust various types of switches, levers, dials, control, and/or hand-held equipment and/or in various combinations	X	X	X	X	X	X	X
	Hold and use a writing instrument for recording patient history or pertinent information	X	X	X	X	X	X	X
	Apply gown, gloves, and mask for Universal Precautions when needed	X	X	X	X	X	X	X
VERBAL	Articulate clearly to a patient in conversational English regarding therapeutic goals and procedures	X	X	X	X	X	X	X
OLFACTORY	Detect changes in environmental odor and (temperature)	X	X	X	X	X	X	X
ENVIRONMENTAL	Function within environments which may be stressful due to fast pace, need for accuracy, and distracting sights and sounds	X	X	X	X	X	X	X
	Recognize that the academic/clinical environment includes exposure to disease, toxic substances, bodily fluids, and/or radiation	X	X	X	X	X	X	X
	Exhibit social skills necessary to interact effectively with those of the same or different cultures with respect, politeness, and discretion	X	X	X	X	X	X	X
	Maintain cleanliness of personal grooming consistent with close personal contact	X	X	X	X	X	X	X
	Function without causing harm to self or others if under the influence of prescription or over the counter medications	X	X	X	X	X	X	X

Technical Performance Standards Informed Consent

1. I have received, read and understand the meaning of MassBay Community College’s Health Professions Technical Performance Standards.
2. I understand that the Standards indicated, as applicable to my intended program of study, relate to the full array of essential performance competencies inherent to my chosen program of study.
3. I also understand that in order to successfully graduate from the program of my choice, I must be able to satisfactorily perform the tasks listed in the standards.
4. It is my responsibility to submit a request to the College’s Disability Resources Office should I wish to receive a determination of reasonable accommodation in performing any of the stated standards.
5. Lastly, I understand that there may be instances where a reasonable accommodation for a method of satisfying the required performance tasks may not be possible.

Student Name (print): _____ ID#: _____ OR SS#: _____

Student Signature: _____ Date: _____

**MASSBAY COMMUNITY COLLEGE
DIVISION OF HEALTH SCIENCES
Performance Notification Form**

Student's Name _____

Faculty / Administrator's Name _____

Date _____

It has come to the attention of the faculty member / administrator named above that your performance has fallen below acceptable standards or your behavior has violated one or more of the policies of the program, division, college and/or clinical affiliate. The specific lapse in performance level / policy infraction is as follows:

If appropriate corrective action is possible, you must satisfy the following expectancies by any dates / time frames specified:

Should you fail to effect the above requirements as stipulated by the dates / time frames stipulated, the following consequence will occur:

FACULTY / ADMINISTRATOR SIGNATURE _____ DATE _____

Student Comments:

I agree with the above described assessment and prescribed action: [] yes [] no

STUDENT SIGNATURE: _____ DATE: _____

(NOTE: Student signature indicates only that the student was given this notification, not that the student agrees with the content of the notification.)

WITNESS SIGNATURE: _____ DATE: _____

(NOTE: Witness signature verifies that this notification was given to the student, but the student refused to sign as required)

**MASSBAY COMMUNITY COLLEGE
DIVISION OF HEALTH SCIENCES
Counseling Record Form**

Date: _____

Student: _____ **Student ID#:** _____

Faculty/Staff/Advisor Name: _____

Program: _____ **Course:** _____

Present at Meeting: _____

Discussion:

Student Comments:

Recommendation(s):

Referral(s) to College Services? **yes** **no**

Faculty/Staff/Advisor Signature: _____ **Date:** _____

Student Signature: _____ **Date:** _____

4/15/10 kcc

**MASSBAY COMMUNITY COLLEGE
DIVISION OF HEALTH SCIENCES
Affective Domain Standards of Performance Warning Form**

Date: _____ **Student:** _____ **Student ID #:** _____

Faculty/Advisor Name: _____

Program: _____ **Course:** _____

Notice of Affective Domain Violation (Check One): #1 _____ #2 _____ #3 _____

Nature of Violation:

Affective Domain Standard(s) Violated:

Remediation Plan (Violation #1 & #2):

Student Comments:

Faculty/ Signature: _____ **Date:** _____

Student Signature: _____ **Date:** _____

Copy of Document Sent to Program Chair and Advisor:

Program Chair _____ **Date Copy of Document Sent** _____

Advisor _____ **Date Copy of Document Sent** _____

4/21/10 kcc

**MASSBAY COMMUNITY COLLEGE
DIVISION OF HEALTH SCIENCES
Academic/Lab/Clinical Alert FORM**

Student Name _____

Course _____

Instructor _____

The Division of Health Sciences faculty wants to provide you with the assistance you need to succeed in your program. We are concerned about your progress and urge you to take the step (s) indicated below immediately.

Academic Concern	Attendance / Clinical Concern / Professionalism
<input type="checkbox"/> The grade you earned on Quiz/exam _____ was unsatisfactory Date: _____ Grade _____ <input type="checkbox"/> WARNING: Your current test grade average indicates you are in danger of not progressing to the next level. Current test average _____	<input type="checkbox"/> You have had one class/lab/clinical absence on _____ <input type="checkbox"/> WARNING: You are in danger of being administratively withdrawn (AW) due to excessive absences <input type="checkbox"/> Your clinical performance on _____ was unsatisfactory <input type="checkbox"/> You have violated the Affective Domain Standards of Performance in the classroom/lab/clinical setting on _____

Recommended Activity:

- See me in my office after class or during office hours by (date) _____ Office # _____ Phone: _____
- Complete the prescribed remediation lab _____ by (date) _____
- Attend open lab for review _____ skills by (date) _____
- See the Academic Tutor for content including math review by (date) _____
- Utilize appropriate college resources (counseling/disability) _____

Instructor Signature: _____ Date: _____

Comments:

Did the student come for help by the date indicated? YES NO

Comments:

Students Signatures:

Comments:

**MASSBAY COMMUNITY COLLEGE
DIVISION OF HEALTH SCIENCES
Report of Exposure, Injury, or Incident Form
To be completed by the clinical supervisor and student**

Name of Individual involved: _____

Immediate Faculty/Preceptor: _____

Clinical facility where exposure occurred: _____

Date/Time of Exposure: _____ Type: Needle Stick: _____ Splash: _____
Mucous Membrane _____ Other: _____

Describe how the incident occurred: _____

Personal Protective Equipment Being Used _____

Actions taken (decontamination, clean-up, reporting, counseling, etc.) _____

Date and Time Incident was reported to Infection Control/Occupational Health: _____

Name/Title of Individual to whom the incident was reported: _____

CHECK LIST

Student was provided with the *Division of Health Sciences Blood and Body Fluid Exposure Policy and Procedure*

I have received and read the *Division of Health Sciences Blood and Body Fluid Exposure Policy and Procedure guidelines*. I understand that I have been advised to contact my health care provider for care that is needed as a result of the exposure that has occurred.

Student Name (Printed) and Signature

Date

MASSBAY COMMUNITY COLLEGE

Incomplete Grade Request Form

Section I and II (to be completed by the Student)

Student Name: _____ Major: _____

Student ID Number: _____ Semester and Year: _____

Instructor: _____ Course Name and Number: _____

Reason(s) for not completing the course work before the end of term: Health Other

Brief description (submit all supporting documentation):

Student Signature: _____

Section III (to be completed by the Instructor)

Instructor's Name: _____

Assignments and/or exams needed to complete this course:

- | | |
|----------|----------|
| 1. _____ | 3. _____ |
| 2. _____ | 4. _____ |

Instructor's signature: _____

Completion Deadline: _____

Student's signature indicating acceptance of the terms: _____

Section IV (to be completed by the Dean)

Dean: _____ Approved Not Approved

Section V

Date Received by Registrar: _____

Cc. Division Office
Student, Instructor

APPENDIX A: Health Sciences Program Grid

Program	Day	Evening	Weekend	Fall Start	Spring Start	Summer Start	Length of Program	Credits/Type	Health Requirements Deadline
Central Processing Technology		X		X	X	X	1 Semester	4 credits Certificate	August 30 th (for Fall), January 3 rd (for Spring), June 7 th (for Summer)
Certified Nurse Assistant	X		X	X	X	X	8 Weeks	Non-Credit Certificate	October 24 th (for Fall), March 1 st (for Spring), July 1 st (for Summer)
Emergency Medical Technician (EMT)	X	X		X	X	X	1 Semester	8 credits Certificate	August 30 th (for Fall), February 1 st (for Spring), June 1 st (for Summer)
Medical Coding		X		X			2 Semesters	27 credits Certificate	Within 30 days of registration
Medical Office Administrative Assistant		X		X			2 Semesters	23 credits Certificate	Within 30 days of registration
Associate Degree Nursing (Day)	X			X			4 Semesters	72 credits Associate Degree	August 1 st
Practical Nursing (Day)	X			X			2 Semesters Intercession 1 summer	49 credits Certificate	August 1 st
Paramedicine (Day)	X			X			2 Semesters 1 summer	37 credits Certificate	August 30 th
Paramedicine (Evening)		X			X		3 Semesters 1 summer	37 credits Certificate	March 15 th
Phlebotomy	X		X	X	X	X	1 Semester	7 credits Certificate	August 30 th (for Fall), March 1 st (for Spring), May 20 th (for Summer)
Radiologic Technology (Day)	X			X			4 Semesters and summer	78 credits Associate Degree	August 1 st
Radiologic Technology Flex (Evening)		X	X		X		9 Semesters	78 credits Associate Degree	August 1 st before Year 2
Surgical Technology (Day)	X			X			3 Semesters	37 credits Certificate	August 30 th
Surgical Technology (Evening)		X			X		3 Semesters	37 credits Certificate	February 6 th

Revised June 2016

APPENDIX B:
Division of Health Sciences Administration and
Faculty

Division of Health Sciences Administration and Faculty

**Lynne Davis, Ed.D., R.T. (R), Dean
508-270-4022**

Support Staff		
Kerry Batte, B.S. Staff Associate	kbatte@massbay.edu	508-270-4022
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Nursing Department		
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Emergency Medical Services Programs (Paramedicine & EMT) Department		
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Radiologic Technology Department		
William Cote, M.A., R.T. (R), (CT)	wcote@massbay.edu	508-270-4263
Karen Dow Hansen, M.Ed., R.T (R) Department Chair	kdow@massbay.edu	508-270-4046
Karen Steinhoff, B.S., R.T. (R) Clinical Coordinator	ksteinhoff@massbay.edu	508-270-4064
Surgical Technology & Central Processing Technology Department		
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Updated September 6, 2017

APPENDIX C: Program-Specific Policies and
Student Acknowledgement Form

Surgical Technology Program

Philosophy Statement, Mission, Goals and Program Objectives

Program Description

The Surgical Technology Program at the MassBay Community College prepares graduates to function as members of the surgical team, assisting the surgeon, registered nurse, or anesthetist in a variety of surgical arenas. Students develop knowledge and skills in maintaining aseptic technique within the surgical areas of health care delivery. Graduates are prepared to take the National Board of Surgical Technology and Surgical Assisting Association (NBSTSA) Certifying Examination, which is approved by the NBSTSA Board of Directors.

Philosophy Statement

Surgical Technology comprises a unique body of knowledge that is both a science and an art. It is essential that the surgical technologist have current knowledge of surgical technology concepts, principles, and skills in order to carry out the motto of the profession “Aeger Primo” – the patient first. Students will leave the Program with an in depth understanding of the principles of asepsis, surgical procedures, communication, human development, teaching / learning principles, biological / social sciences and current technology used in the profession.

Mission

The **Mission** of the MassBay Community College Surgical Technology Program is to prepare its graduates as entry-level surgical technologists who are knowledgeable, skilled, and have developed the essential behaviors of the profession. This preparation will occur in the cognitive, psychomotor, and affective learning domains.

Goals

To accomplish the Mission of the Program, the instructors and graduates of the Program will realize the following Cognitive Domain, Psychomotor and Affective Domain **Goals**:

COGNITIVE DOMAIN:

The goal of the program is to provide students with a comprehensive background in the basic sciences, with mastery of aseptic technique, with perfection of surgical skills, and with a keenly developed surgical conscience as established in the AST Core Curriculum, 6th Edition.

OBJECTIVES:

- a. Apply the knowledge of anatomy, physiology, microbiology, and pharmacology to the care of the perioperative patient as it relates to the role of the Surgical Technologist.
- b. Utilize knowledge and skills to attend to the physical, psychological and social needs of the patient.
- c. Qualify to sit for the NBSTSA Certification Exam.
- d. Demonstrate recognition of the need for continuing education to enhance their professional and personal growth to keep up with technological advances in medicine.
- e. Apply medical terminology to communicate clearly and effectively with patients, families, physicians and co-workers.

PSYCHOMOTOR SKILLS:

The goal of the program is to teach professional techniques which will promote the practice of clinical skills independently.

OBJECTIVES:

- a. Demonstrate perioperative technical skills and knowledge in a safe and effective manner.
- b. Exhibit safe practice methods involving preparation routines of the intraoperative environment, patient positioning and emergency procedures.
- c. Display and incorporate aseptic principles in the intraoperative setting.
- d. Actively participate in the scrub role in a variety of procedures in surgical specialty areas according to hospital policy.
- e. Maintain a grade of 75% or better in all courses in the program.

AFFECTIVE DOMAIN:

The goal of this program is to develop surgical technologist who practice standards in a professional manner in order to provide patients with quality care.

OBJECTIVE:

- a. Attain comprehensive ethical, legal, moral and cultural awareness as they relate to the surgical technologist's ability to provide patient care and how this awareness fosters cooperation and success among member of the surgical team.
- b. Shows the importance of and the ability to model the professional attributes of the Surgical Technologist including the maintenance of a strict 'surgical conscience'.
- c. Practices dependability, honesty and integrity in clinical practice.
- d. Utilize critical thinking to perform the duties of the surgical technologist.
- e. Demonstrate accountability in their practice based on current knowledge.

Surgical Technology Program Outcomes

Successful graduates of the Program will be able to:

1. demonstrate accountability and ethical decision-making as a member of the surgical team (*affective*);
2. demonstrate the value of becoming a life-long learner in the profession (*psychomotor*);
3. Communicate effectively and advocate for patient safety as a member of a multi-disciplinary surgical team (*cognitive*);
4. Provide safe, effective care of the surgical patient based on the principles of asepsis (*affective / cognitive / psychomotor*).

SURGICAL TECHNOLOGY EDUCATION

Education for surgical technology takes place in institutions of higher learning. The community college environment provides the framework to prepare the surgical technology students for active participation in the role and the responsibilities of practice. This education facilitates one's growth and participation in society.

CERTIFICATION EXAMINATION REQUIREMENT

All students who complete the surgical technology certificate program at Mass Bay are required to take the NBSTSA certification examination on campus with their graduating class. The test is given as a computer-based test. The cost of the examination is approximately \$250 and is the responsibility of the student. There are NO exceptions to taking this examination test in this format or on the designated date.

TEACHING/LEARNING

Teaching is the process of facilitating learning by identifying learning objectives, providing the appropriate learning experiences from simple to complex and guiding the student through the

course of study. Teaching requires a mastery of the teaching process and knowledge of the subject matter. The learner is actively engaged in a continuous process that involves cognitive, affective, and psychomotor activities. Successful learning is evidenced by the development of critical thinking skills and specific behavioral changes that can be evaluated. Learning occurs best in an environment of mutual acceptance and respect. The teaching of the theory component of surgical technology is presented in conjunction with clinical practice throughout the Surgical Technology Program curriculum.

ADMISSIONS CRITERIA

1. High School diploma or equivalent, or Associate Degree or higher
2. MassBay Placement into College Writing (EN 100) or completion of Introduction to Language (EN 090).
3. MassBay Placement into Introductory Algebra (MA 095) or completion of Basic Math Studies (MA 090) with a grade of C or higher).
4. Successful completion of the Reading Assessment Test with a score of 72 or higher is also required.

A person who has accepted admissions into the Surgical Technology Program understands that they must meet all health, immunization, and healthcare provider CPR requirements and CORI/SORI clearance requirements by the published deadline in order to obtain a “COMPLIANT” report in the Castle Branch online documentation clearance tool. If a student accepts admissions and is not ready to go to clinical by the published date, he/she understands that they will be withdrawn from the program and will not receive a tuition refund. There are no exceptions to this requirement, and there is no guarantee of readmission.

READMISSION CRITERIA

1. See Section IIB
2. Students who are readmitted to the Surgical Technology Program are expected to fulfill the requirements of the current MassBay College Catalog at the time of readmission to the Program. In addition, students must meet all Admissions requirements at the time of re-admission if there has been an interruption of the academic program for more than one semester.

ADVISORS

All Surgical Technology students will have an assigned advisor. Students are urged to see their advisors for academic and clinical concerns, career plans, and other issues that arise. Advisor input is an essential component in the registration process.

WORK POLICY

Students who are enrolled in the Surgical Technology Program will not be paid, nor will they function as employees during program clinical hours. No student on duty during a clinical assignment may be substituted for a paid employee in any setting.

ATTENDANCE

(See Section IIA)

Surgical Technology students will comply with the attendance policy as stated in the College Catalog, and the sections cited above of the Division of Health Sciences (DHS) Student Handbook and Policy Manual. Attendance is mandatory for classes, laboratory sessions and clinical affiliations.

The Surgical Technology Program has a zero-tolerance absence policy for class and clinical/lab. Class, clinical and lab absences should not occur except for extenuating circumstances. Due to patient care requirements, students must report to the clinical area on time. If the student is late, it is a clinical absence. Absences may result in program withdrawal. The Surgical Technology Program has a specific clinical attendance policy document that each student signs and which a copy is provided to the clinical sites. This document is attached in section IIA.

If a student misses clinical due to illness that is not safe to expose OR patients and staff, the student understands that they may be asked to obtain clearance to return from their physician. The potential cost of any office visits related to clinical return is the responsibility of the student. Course faculty will determine a clinical make-up assignment. If a student has more than 2 clinical or laboratory absences, the student may be withdrawn from the course. The student may petition the Department Chair/Clinical Coordinator for review on a case-by-case basis. Documentation and verification of extenuating circumstances must be submitted along with a record of past class/lab/clinical absences in surgical technology courses. The option for a third clinical make-up day is further based on space available within the pre-existing clinical rotations. Clinical make-up opportunities are not guaranteed.

In the case of a student's absence on a clinical day, one of the following may be implemented: an alternate clinical assignment OR a clinical make-up day.

Note: Students should follow guidelines established by the Department Chair/Clinical Coordinator for each clinical rotation with regard to notification of a clinical absence.

COMMUNICABLE DISEASE POLICY

(See Section IIE)

The Clinical Externship

Students in the health programs are expected to deliver care without prejudice to all patients. The only exception to the above would be in consideration of personal risk factors, such as in cases of immunosuppression.

Students are required to follow the policies governing caring for patients with communicable diseases that are written at each of the clinical sites. Students must also follow the clinical site's policies in caring for patients when the caregiver has a communicable disease.

Students in the health programs must realize that they have an ethical and legal responsibility to the individual for whom they provide care to maintain a high standard of health.

GRADING POLICIES (See Section IIA, pages 8 -10 of this DHS Manual)

See also: "Graduation Eligibility and Competencies" and "Academic Regulations" in the current College Catalog.

Grading Policy – Surgical Technology Program

All science courses must be completed with a grade of "C" or better. All Surgical Technology courses must also be completed with a grade of "C" or better. In order to pass a course, the student must attend and successfully complete the class and laboratory components which are concurrent. Clinical performance is evaluated on Pass/Fail basis.

Grade Appeal and Grievance Procedures (see the current MassBay Community College Student Handbook)

Clinical Curriculum

Clinical experiences will include the selection of supplies and equipment; participation and demonstration of knowledge and experience in vital signs, monitoring, patient skin preparation, appropriate specimen handling, transfer and positioning of patients, knowledge and application of ESU.

SURGICAL CASE REQUIREMENTS*

120 surgical cases are required in order to take the NBSTSA certification examination. The cases a student participates in must represent the following surgical specialties:

- 30 cases in general surgery, of which 20 must be in the first scrub role
- 90 cases in various surgical specialties.
- 60 of the specialty cases must be in the first scrub role, and distributed between a minimum of five surgical specialties.
- 15 is the maximum number of cases that can be counted toward a particular surgical specialty.
- Up to 10 diagnostic cases and 5 vaginal delivery cases can be in the “Second Scrub” role.

*When a student is in an observational role, it will be documented but will not count towards the minimum 120 surgical case requirement.

Surgical Technology program faculty will verify that all of the above requirements meet the program’s mandatory criteria. This will be accomplished by the student’s clinical log, and daily case list attendance sheets that are signed by the student and preceptor or clinical site representative.

STUDENT DOCUMENTATION OF CLINICAL EXPERIENCES

All students will be required to document their surgical cases on a daily basis, noting the date, type of procedure, and whether they were in a First Scrub, Second Scrub, or Observation role using the Daily Case Sheet. This form requires 2 signatures: 1 from the student and one from a hospital representative. Cases must be presented to the clinical instructor on a bi-weekly basis for review. The student’s clinical log will be maintained by the student and will be kept on campus for review at any time by the clinical instructor. The final tally of cases is verified by faculty and student signatures and are part of the required documentation for board examination eligibility.

OBJECTIVES FOR SPECIFIC CLINICAL REQUIREMENTS

In Obstetric procedures, students will:

- Recognize relevant anatomy and physiology of the female reproductive system.
- Define any special preoperative preparation and procedures related to obstetric procedures and tests

- Demonstrate knowledge of obstetric instrumentation and medications.
- Identify key terms of labor and delivery
- Describe the function of the Surgical Technologist role
- Demonstrate knowledge of the characteristics of normal labor.
- Be able to interpret, assess, and recognize variations of the preoperative, intraoperative, and postoperative care of the obstetric patient and surgical patients.

In Central Sterile Processing Procedures, students will practice the following:

- Decontamination
- Disinfection
- Sterilization
- Monitoring
- Packaging
- Case cart delivery, and
- All related principles that apply to safe and efficient outcomes for patient care.

CLINICAL ROTATIONS AND FACILITIES

Due to the shortage of available clinical placements, clinical partnerships are vital for successful rotations and completion of the program. Therefore:

- Clinical placements are the responsibility of the Surgical Technology Department Chair/Clinical Coordinator. Students must not initiate contact with clinical sites until directly told to do so by the Department Chair/Clinical Coordinator.
- The Department Chair/Clinical Coordinator gives the students written or emailed notification of their site and all relevant orientation information and contact information for that site. The Nurse Manager or Nurse Educator at each site is also given contact information for the student.
- Any specific orientation information for a selected site will be specifically communicated to the student. Please note an orientation at some facilities is required and may need to occur on a date that does not follow the actual college calendar.
- Students are not allowed to change clinical day or make arrangements for clinical days or times with nurse managers or educators. Any request for changes must start with a meeting with the Department Chair/Clinical Coordinator.
- If the clinical facility requests that a student be removed due to a violation of facility policies, there is no guarantee that another clinical placement will be found. The student will therefore be withdrawn from the program.

Failure to follow any of these policies will cause the student to be withdrawn from the course. Readmission is not guaranteed.

CPR CERTIFICATION

(See Section IID, page 22 of this DHS Manual)

All students must be CPR (Cardiopulmonary Resuscitation) certified. The following CPR levels are acceptable:

American Heart Association: Basic Life Support for Health Care Providers

Or

American Red Cross: CPR/AED for the Professional Rescuer

Students are not permitted in the Operating Room unless they are CPR certified.

EMERGENCY CARE

Students should refer to their health insurance policy for coverage in the event of an emergency in the clinical area. Our agreement with clinical agencies is that they will provide emergency care, but that the student will assume the cost for care.

EVALUATION OF CLINICAL PERFORMANCE

(See Section IIE, pages 30 of this DHS Manual)

Attendance is required for all labs and clinical experience (see attendance policy). All clinical objectives must be met satisfactorily to pass a Surgical Technology course. A student who meets all the clinical objectives in a satisfactory manner will receive a PASS grade for the clinical component of the course

Students are expected to demonstrate consistent and progressive mastery of surgical technological activities in the clinical area. Students' performance and behavior must be safe and appropriate at all times. Students will receive written notice of their progress toward clinical objectives on an every two week basis. Each student will review the evaluation with the instructor/preceptor and both the student and the instructor/preceptor shall sign this document. Students are expected to meet the behavioral objectives of the clinical area with equal amounts of guidance and instruction as required by other students at the same level. **ONLY COMPETENT, PREPARED STUDENTS MAY PRACTICE IN THE CLINICAL AREA.**

Unsatisfactory Clinical Performance is defined as, any student who:

- a. demonstrates a consistent pattern of weakness in one or more clinical competencies and therefore does not meet all clinical objectives
- b. fails to demonstrate progressive mastery of clinical competencies and objectives
AND/OR
- c. requires more guidance and instruction than is required by other students at the same level

Clinical warning

(See page 30-31 of this DHS Manual)

For unsatisfactory clinical performance, the clinical instructor will give a written warning to the student. Weaknesses will be identified in writing by the instructor with a written statement of what the student must do to satisfactorily meet the clinical objective(s). A copy of the written warning will be placed in the student's record and a copy will be sent to the Surgical Technology Program Coordinator who will also notify the student of his/her status in writing. A warning of unsatisfactory clinical performance may be given at any time during the semester. An unsatisfactory clinical grade at the end of a Surgical Technology course constitutes a course failure.

Calculating Grades After Clinical Failure

If a student fails both didactic and clinical, the final grade will be the didactic grade.

If a student passes didactic, but fails clinical, the final grade will be a C-.

If a student is determined to be clinically unsafe, the final grade will be F.

LABORATORY TESTING

There are lab skills checklists in the first semester Surgical Technology course. Students must achieve a “Pass” grade in every skill in order to pass the course. There is also a Laboratory Practical Exam at the end of the semester. Laboratory Practical final exams may be recorded. Students must also receive a Pass grade on this exam in order to pass the course. The following rules for laboratory skills check lists and the Laboratory Practical apply:

- The student will have three opportunities to pass each lab skill on the checklist.
- A final testing day will be posted. No one may test a skill after the deadline.
- Any student who does not pass a lab skill after three attempts, or who misses the deadline, will be required to withdraw from the course.
- The student must attend at least one open lab before the practical exam.
- You must pass the lab practical in order to pass the course.

HEALTH REQUIREMENTS

(see first pages 21-22, Section II.D. of this DHS Manual)

Each student must complete the Physical Examination and Immunization form and upload this form to their Castle Branch account by the published deadline. A completed health form includes:

- a physical examination by a physician, nurse practitioner or physician’s Assistant within the past year;
- a measles, mumps, rubella vaccine given after 1966
- an additional live measles vaccine given at least 12 months after the first one OR laboratory evidence of immunity to measles
- proof of rubella immunity by rubella vaccine or titer
- Documentation of immunity to Varicella (2-dose vaccine or positive titer)
- Hepatitis vaccination series and positive Hepatitis B Titer. Every student will be asked to sign a document verifying hepatitis vaccine status. NOTE: Those who cannot receive the hepatitis vaccine or those who refuse to do so will need to sign a waiver.
- Seasonal influenza vaccine or signed waiver form.
- 2-Step Tuberculin test by Mantoux method OR QuantiFERON test. (NOTE: Those with positive skin testing must also submit a report of chest x-ray. Those with positive chest x-ray must submit proof of tuberculosis treatment.)

No Student will be admitted to any clinical experience until their health forms are complete and validated as “Complaint” by Castle Branch.

DIVISION OF HEALTH SCIENCES STUDENT AGREEMENT FORM

I, the undersigned student, having read and reviewed the entirety of the MassBay Community College Division of Health Sciences Handbook and the addendum specific to my program, do agree to adhere to and abide by all College and Health Program policies and/or their amendments, during my matriculation at MassBay Community College. Furthermore, I agree to adhere to the conduct codes and performance policies of the Clinical Education sites to which I may be assigned. I clearly understand that the failure to adhere to and abide by these policies and regulations of the College, Program, Hospital and/or Clinical Site may result in my removal and subsequent withdrawal from the clinical site/classroom and/or program.

I also understand that in addition to faculty employed at the College, there may be employees of the Hospital / Clinical Agency or Practicum site which are designated by the College as a Supervisor/Preceptors / Clinical Instructors. As such, these individuals will be functioning as members of the team of instructors within one or more of the Program's clinical or practicum courses. Therefore, I understand that assessment / evaluation information about my academic and/or clinical or practicum performance may be shared with the designated / appropriate Supervisor or Clinical Site staff member(s) for the sole purpose of providing them with information needed by them for patient / client assignment or College required clinical performance evaluation / assessment. Furthermore, my academic and/or clinical records may be reviewed by duly authorized representatives of professional, state, or national accreditation agencies.

I further understand that the Hospital or Clinical agencies or Practicum site to which I may be assigned, may require that I receive clearance from the Commonwealth of Massachusetts, that I do not have a criminal record of an offence which would compromise the safety or well-being of the clients or patients of that site. Therefore I understand that my name will be submitted to the state for a CORI (criminal offense record inquiry) and SORI (sexual offense record inquiry) check. A CORI/SORI check report of such an offence may preclude my eligibility for clinical or practicum assignment and thereby may negate my matriculation in the program.

Lastly, I understand that I am required to satisfy the Division of Health Sciences' immunization report requirement and my program's CPR requirement by published deadlines. Failure to do so will preclude my eligibility to participate in the clinical or practicum phase and may result in my inability to complete the program.

Please sign and date this form and submit it to your "My CB" account unless instructed otherwise by a faculty member.

Student's Name (Printed) _____ Student's signature _____

NOTE: Submission of this form is required for matriculation in the Program.