

BERGEN COMMUNITY COLLEGE
RESPIRATORY THERAPY PROGRAM
Student Policies and Procedures Manual

This student manual which has been provided for your information describes the policies, procedures and professional competencies required for the successful completion of this program. It has been prepared for your information. Please read it carefully and refer to it as needed.

The Bergen Community College Respiratory Therapy Program is fully accredited by the Commission on Accreditation for Respiratory Care (CoARC).

Commission on Accreditation for Respiratory Care
1248 Harwood Road
Bedford, TX 76021-4244
(817) 283-2835 - (800) 874-5615
www.coarc.com

Throughout the program, competence develops from a combination of didactic, affective, cognitive, and psychomotor skills necessary for the safe and effective delivery of respiratory therapy. This program employs competency-based mechanisms to ensure the students develop and master the knowledge, skills, behaviors, and professional attitudes expected of the advanced-level practitioner.

The faculty and staff are readily accessible to assist you if further information or explanations are needed. I hope you will find this handbook useful throughout your studies here at the Bergen Community College – Respiratory Therapy Program.

Our best wishes for a successful Respiratory Therapy education and career.

Amy Ceconi, Ph.D., RRT-NPS, RPFT
Program Director

Joseph Goss, MSJ, RRT-NPS, AE-C
Director of Clinical Education

Program Goals

To prepare graduates with demonstrated competence in the cognitive (knowledge), psychomotor (skills) and affective (behavior) learning domains of respiratory care practice as performed by registered respiratory therapists (RRT's).

To achieve these goals the following objectives have been set forth:

1. Upon completion of the program, students will demonstrate the ability to comprehend, apply, and evaluate clinical information relevant to their role as advanced-level respiratory therapists (cognitive domain).

Assessment methods:

- NBRC CRT Certified Respiratory Therapist Entry-Level Examination (CRT) passing rates.
- NBRC Comprehensive Written Registry SAE passing rates
- CoARC Employer survey
- CoARC Graduate survey

2. Upon completion of the program, graduates will demonstrate technical proficiency in all skills necessary to fulfill their role as an advanced-level respiratory therapist (psychomotor domain).

Assessment methods:

- CoARC Employer surveys
- CoARC Graduate surveys

3. Upon completion of the program, graduates will demonstrate personal behaviors consistent with professional and employer expectations as an advanced-level respiratory therapist (affective domain).

Assessment methods:

- CoARC Employer surveys
- CoARC Graduate surveys

Program Policies and Procedures

Academic Achievement and Program Progress

1. High standards of professional performance demand that students maintain good academic progress throughout their course of study in the program.
2. To meet the program's minimum academic standards, students must achieve at least a "C" grade in all of the respiratory therapy courses.
3. Students who receive a final grade below a "C" in any course will be given one opportunity to repeat that course at the time of its next regularly scheduled offering. Students who do not achieve at least a "C" grade in a repeat course normally will be dismissed from the program.
4. Students receiving two or more grades below "C" normally will be dismissed from the Program.
5. Students must maintain active enrollment at the College during their course of study. Any student not enrolled for a period of two semesters will be withdrawn from the program.
6. Students are expected to follow the graduation requirements as published in the current college catalog, as well as, successful completion of all self-assessment examinations as described later in the manual.
7. Academic catalog is located on the Bergen Community College website. The program additionally utilizes WebCT calendar for course specific announcements.
8. Students will be required to complete all academic course credit as published in the current college catalog.

Progression in Courses and Program Grading

Students will follow the program sequence established in the current college catalog. The student **MUST** earn a minimum grade of C (75%) or better in both the didactic and clinical courses in each semester in order to progress to the next level of professional studies. An unsuccessful attempt at any professional course may only be repeated once. Students will be permanently dismissed from the program when any two respiratory therapy courses not successfully passed.

A	90% to 100%	D	Not acknowledged
B+	86% to 89.9%	F	Below 75%
B	80% to 85.9%	W	Official course withdrawal
C+	75% to 79.9%	E	Unofficial course withdrawal
C	Not acknowledged		

Program Costs

Tuition and course fees are established by Bergen Community College. All refunds are administered in accordance with college policies as outlined in the current college catalog.

An estimate of additional program costs includes:

1. Uniform (1): \$75
2. Stethoscope: \$50
3. Self-assessment examinations: \$125
4. Cardiopulmonary resuscitation course: \$25
5. Graduation pin: \$10

Additional expenses may occur during the student's course of study. These expenses will be discussed with the student.

Classroom Attendance Policies

1. These policies will be determined by the instructor and could count toward 10% class participation grade on the respective course syllabus.
2. Students demonstrating chronic tardiness or absenteeism will be placed on academic warning or probation, and may be subjected to termination from the program.
3. Absence from a class during a scheduled exam will result in the student receiving a 'F' grade for that exam. Subject to change by the course instructor.
4. Students missing more than 5 classes in one semester will receive a program warning letter.

Counseling and Tutorials

1. The program faculties maintain office hours for counseling and are available to provide tutorial and personal assistance to students.
2. Students must make appointments in advance to meet with the respective instructors.
3. Students may also obtain assistance from the college tutoring center. Appointments must be made through the center.
4. The college has a personal counseling center for those students who may need personal assistance. Appointments are made directly through this center.
5. Any problems, concerns, or questions should be directed to the course instructor, the student's advisor, or program faculty.

Academic Conduct

1. The Respiratory Therapy Faculty adheres to the policy statement governing academic conduct as outlined in the Bergen Community College Catalog. The Program Faculty strongly supports this policy and considers professional and ethical behavior the basis of all respiratory therapy practice.
2. Acceptable quality of work and mature behavior are expected from every student at all times. Students are regarded as professionals and are expected to conduct themselves accordingly.
3. All students are required to adhere to the policies and procedures of the school as outlined in the college catalogue.
4. Students are on their honor to report immediately to a faculty member or to the Program Director any academic misconduct observed during testing or completion of other assignments. Failure to do so will be considered unacceptable behavior and will be subject to disciplinary action, including dismissal from the program.
5. Faculty will monitor testing so that all students can be assured that every effort is made to support the college policy regarding academic conduct.
6. Laptops / PDAs are permitted in the classroom at the discretion of the instructors.
7. Additional rules and regulations governing student conduct can be found in the current college catalog.

Admissions

Admissions into the Respiratory Therapy program is based on the below criteria. The program admits students beginning each fall semester. A minimum GPA for admissions eligibility: 2.0 on a 4.0 scale. Application deadline is published in the current college catalog.

Students may apply to Respiratory Therapy – Health Professions using one of the following:

1. If you are a degree seeking student in another program at Bergen Community College, you may apply on-line using the change of curriculum form.
 - a. The program recommends that you contact Ms. Elsa Valcarcel in the Admissions Department for assistance. She may be reached at evalcarcel@bergen.edu. Make sure that all applications are complete. Incomplete applications will not be considered. All applications must be received by the date published in the current college catalog.
2. College Basic Skills Test (Math/ English)
 - a. This is a requirement for all incoming students who wish to apply to any college program. Students who are placed into basic mathematics and algebra are advised

that it will take two (2) years to complete their requirements before being considered for admissions to the Respiratory Therapy Program – One year for their remedial courses and one year for their college-level courses. This test is given in the college Testing Center.

- b. A score of 530 or above on the Math SAT will waive the math portion of the basic skills test. A score of 540 or above on the Critical Reading SAT will waive the English portion of the basic skills test.

3. Completion of the Prerequisites Courses

- a. High School prerequisite courses: Chemistry with lab; Biology with lab;
- b. Algebra 2;
 - i. College substitutions: BIO-109; CHM-100; MAT-035
- c. The program prefers you to earn a B+ grade or higher
- d. Complete a remedial mathematics and English course at BCC and earn the same grades.

Note: High school Biology is waived if college Biology, preferably BIO-109, is successfully completed.

4. Criminal Background History Check

- a. After completing the first steps of the admissions process and it is determined that you meet the admissions criteria, the Dean of Health Professions will have a letter sent to you regarding completion of the Criminal History Background Check (CHBC). The letter will provide you the information needed to complete the process electronically. This check must be completed within five days of receipt of the letter. It is imperative that candidates understand that the CHBC is requirement of the accreditation agency of our clinical education centers and not of Bergen Community College. The applicant is to read and follow the Division of Health Professions policy for criminal history background checks, most especially since the outcome of this report affects admissions into this program. The cost for the background check is the responsibility of the student.

Transfer Policy:

Student's transcripts will be evaluated on a program by program basis. Credit for courses taken at other Colleges outside the Respiratory Therapy curriculum will follow the policies established by Bergen Community College admissions office.

Re-admission

Repetition of courses will be at the discretion of the Program Admissions Committee and will depend upon availability of space in the course and program when the course is offered again. If a student receives an “F” due to violation of program policies, they will not be considered for repetition of courses, and will be dismissed from the program.

Re-admission to the program is based on the following criteria:

1. Students may be readmitted one time only.
2. The student must submit a request in writing to the Program Director before March 31st for admission into the Fall semester, before October 31st for admission into the Spring semester or before March 1 for the summer term.
3. A cumulative GPA of 2.5 is necessary for readmission.
4. The student must retake and demonstrate proficiency (75%) on the final exam(s) of the preceding semester(s) and certain competency procedures.

If a student chooses to withdraw from the Program or take a semester(s) leave, and is in good standing with the Program (including passing all courses) the student may return to the Program but will be held accountable to the re-admission criteria above.

Grievance Policy

A grievance is a student complaint and request for a specific remedy, e.g. a student’s belief that a service was inadequate, a student’s disagreement or complaint with a decision, rule applied by the Program; a student’s belief that he / she has been treated in a discriminatory manner; or a student’s challenge of a grade. Grievances raised by a student should be discussed with the involved faculty member first. If the grievance is not resolved the students should follow appropriate procedure for student complaints as outlined in the current college catalog.

Employment During Enrollment

This is a full-time curriculum, which requires student’s time and concentration. Even the exceptional student will find it difficult to work and still maintain a high quality of academic work. Program and clinical assignments will not be altered to fit an individual’s work schedule.

In accordance with New Jersey State licensure laws, students are not permitted to work in the clinical setting providing respiratory care services.

Demographic Data

Each student is required to provide to the college accurate demographic data. Correct information for each respiratory student is essential so that the student can be contacted. Students

are responsible for following college procedure to provide any change in name, telephone number, address, and email address that occurs during the course of the semester.

Transportation

It is the responsibility of the student to find their own transportation to all classes and clinical. Special arrangements will not be made for those students who do not drive.

Clinical assignments are individual and scattered, therefore students cannot depend on the use of car pooling.

Education Symposia

The Respiratory Therapy Program arranges single day and multiday educational symposia as part of the student's learning experience. Dates and times will be scheduled well in advance. Expenses related to any symposia will be the responsibility of the student.

Secretarial Support

The Respiratory Therapy Program secretary is located in room S-336 and is available during normal college business hours. The secretary's number is: 201-689-7025.

Program Laboratory

1. The program laboratory affords the students the opportunity to practice and demonstrate competency in simulated clinical skills using state-of-the-art equipment and supplies. For this reason, the care and use of equipment and supplies is included as a component of the lab participation grade in all laboratory courses.
2. To maintain cleanliness and prevent damage to electrical equipment, no eating or drinking is permitted in the work area of the laboratory.
3. Students are responsible for the proper setup and disassembly of their lab equipment. All equipment must be put away at the end of each lab session.
4. All hazardous waste, sharps, and garbage must be disposed in the proper receptacles.
5. Any breakage of equipment must be reported to the laboratory instructor immediately.

Examinations and Testing Procedures

1. Based on both data and historical experience, the Program faculty have determined that students who consistently fail to achieve passing grades on class, lab or clinical exams are unlikely to succeed in passing national board examinations, gain licensure, or meet minimum job expectations.
2. Only writing tools will be allowed on the student's desk. No books, notes or any other materials are allowed. The instructor will provide scrap paper for students taking WebCT exams.
3. Only minimal opportunities to leave the testing area will be given and may be supervised.
4. If a fire drill or other emergency arises, the test may be considered void and rescheduled.
5. No talking will be allowed during exams.
6. The course instructors have the right to modify the examination policy to meet the nature of an examination at their own discretion.
7. Students may not use English translator computers during exams.
8. All electronic devices must be turned off and put away.
9. No hats may be worn.
10. Seating will be random at the discretion of the instructor.
11. Exams will be reviewed at the discretion and convenience of the course faculty.
12. Faculty reserve the right to delay the return of exam grades until review of the exam has been completed.

Comprehensive Examinations

As a requirement for graduation from the program, all students must complete and pass the National Board for Respiratory Care (NBRC) Certified Respiratory Therapist secured self-assessment examination (SAE-CRT), Registered Respiratory Therapist secured self-assessment examination (SAE-WRRT), and the Registered Respiratory Therapist clinical simulation self-assessment examination. All three of these examinations are computer based and will be completed at the college.

These NBRC self-assessment exams will be utilized for student and program evaluation purposes. Results will be provided to the student with exam score and a score content outline. A passing score on the SAE-CRT examination will be 105 questions correct or 75%. The passing score for the SAE-WRRT exam is based on the current CoARC standards.

Students who do not pass the NBRC SAE-CRT and SAE-WRRT exams cannot graduate until this requirement is met. The student may be required to participate in remediation prior to repeating a different version of the respective exam. The cost of all three self-assessment exams (SAE-CRT, SAE-WRRT and SAE-Clinical Simulation exams) is established by Applied Measurement Professionals, the examination organization of the NBRC, and unless cost otherwise provided, is the responsibility of the student.

Clinical Policies and Procedures

Expectations:

1. It is expected that all students appear at the clinical area on time (at least 5 minutes before the assigned hour) and be attired neatly and cleanly in his / her appropriate uniform.
2. The clinical externship is a learning experience. It is each student's responsibility to learn as much as possible from each pre-conference, the actual clinical experience, and the post-conference. Students are expected to show initiative in seeking new learning experiences.
3. Clinical assignments and objectives are usually presented in the group meetings. Where indicated in the objectives, the student should be prepared to answer discussion questions and administer anticipated therapy for that unit of study.
4. Each student is expected to be able to perform the skills required in each unit of study after appropriate practice.
5. Each student is responsible for securing the consultation or assistance of his or her clinical instructor on those respiratory situations with which she/he is inexperienced or unfamiliar.
6. It is the responsibility of each student to inform their respective clinical instructor that special learning experiences are needed.
7. Each student is expected to take all precautions necessary for the safety of the patient. A careless attitude or inadequate preparation resulting in unsafe performance can be cause for dismissal from the clinical area.
8. The course requires the application of classroom learning to patient care; therefore, the student's final evaluation will reflect her / his overall performance.
9. The student will meet all general requirements for clinical experiences as outlined in the clinical objectives.
10. The student is expected to report any, and all, incidences occurring at the clinical site to their instructor.
11. The student must inform their respective clinical instructor if they are leaving the assigned area. Students are not to leave the hospital unless dismissed by their instructor.
12. Students are required to maintain a copy of their clinical experiences. The student is responsible to see that all appropriate procedures have been observed and signed off by their clinical instructor.

Personal Conduct and Dress Code:

Each student is expected to conduct himself / herself in a professional manner while at the clinical affiliate, while wearing uniforms, or in public identifying themselves as students of the Bergen Community College Respiratory Therapy Program. A student's attitude, conduct, and physical appearance reflects on the student, the Program and the profession of respiratory care. Unethical or otherwise unprofessional conduct will not be tolerated.

Please read the following dress code very carefully. It is your responsibility to adhere to the written dress code at each clinical externship experience. Students improperly attired will not be admitted to the clinical affiliate and will be considered absent for that day.

1. Students are expected to wear the regulation blue Bergen Community College Uniform purchased through Belle Uniforms.
2. Students will wear a navy blue scrub top and pants.
3. A white consultation style laboratory coat will be worn over the uniform with the program patch adhered to the left sleeve.
4. Footwear for both males and females must be clean and neat at all times. Comfortable footwear is highly recommended. If sneakers are worn they must be white or black and appear to be worn only for clinical or work (no high top or basketball style sneakers). No open-toe, high-heel shoes, or clogs.
5. All students must wear a name pin / tag, depicting his / her name. The name tag will be purchased as part of the uniform package through Belle Uniforms.
6. If a special uniform, such as scrubs, is required for a specialty rotation (OR, Special Procedures), the department that the rotation is with will provide it for you. You must wear your regular uniform to clinical, even if you expect to wear another type of uniform the entire day. Changing rooms will be provided for you.
7. Hair should be neatly combed and pulled back away from your face.
8. Fingernails must be trimmed, clean, and no longer than ¼ inch in length.
9. Jewelry must be kept to a minimum. No extremely large or inappropriate rings, necklaces, earrings or bracelets. No pins of a political, humorous, etc. are to be worn. Any eyelid, nose, lip or tongue earrings must be removed before clinical.
10. Each student must wear a watch with a second hand, carry a stethoscope, pen, and small note pad.
11. Cellular phones, MP3 players, and other personal electronic equipment is not permitted to be used except in designated areas of the clinical site. The clinical instructor is permitted to confiscate equipment if used inappropriately and will be returned at the end of the clinical day.

12. Make-up, when worn, must be applied subtly. Tattoos, wherever possible, should be covered. Perfume or colognes are not to be worn.

Clinical Hours and Attendance Policy:

1. During each semester, the student will attend clinical (2) two days per week. The clinical hours are 7 AM to 3 PM.
2. If the college cancels classes due to inclement weather, clinical will be canceled. Students should log on to the college web page at www.bergen.edu and check the Snow Emergency information. The program reserves a right to complete scheduled clinical sessions unless the county declares a weather emergency. The college also utilizes an Emergency Notification System provided by Blackboard Connect. Students interested in receiving immediate notification on critical campus alerts must register online at www.bergen.edu/emergencyalert for this system. This system provides text, email and voice notification services.
3. If the student is to be absent from clinical, it is the responsibility of the student to contact the respective hospital within one hour prior to the start of clinical. Hospital department numbers and directions are provided. Failure to follow procedure will result in an advisement warning letter.
4. Clinical Absence Policy: 10% will be deducted from the student's instructor evaluation for every absence for that clinical rotation. No exceptions for any reason. Any student who is sent home by their instructor for an illness will not lose 10% for that day and excused. If the student is part of a car pool arrangement, individual arrangements will need to be made because the entire carpool group is not excused.
5. Lateness Policy: If the student is going to be late, it is the student's responsibility to call the (hospital) respiratory department and notify the instructor. Lateness will be reflected in the clinical grade. Three lateness's will be the equivalent of one day absent and will be graded at 10% off the evaluation the third late day occurred.
6. If the student becomes sick during the clinical day, it is at the discretion of the clinical instructor to dismiss the student from clinical.
7. Excessive absences and tardiness will not be tolerated. We expect that all students will act professionally at all times.

Professional Behavior and Patient Relations:

Professionalism is an extremely important aspect in our profession. The clinical instructors will be evaluating the student's professional behavior continuously throughout the program. If a student exhibits any instances of unprofessional behavior, this will be documented on the daily anecdotal record. This can also be cause for dismissal from the clinical area and possibly the program.

1. Students are to be kind, reassuring, and considerate at all times. Arguing with anyone, especially patient's, will not be tolerated. Students must not allow personal problems or attitudes to affect patient care.
2. Students must adhere to the patient' Bill of Rights and HIPPA Laws. Patients must be treated with respect.
 - a. The patient has the right to know what therapy is being administered, who ordered it, and why it is being given, and that the caregiver is a student.
 - b. The patient has the right to refuse all therapy. All refusals must be documented in the patient's chart and reported to the instructor.
 - c. Patient confidentiality and privacy acts must be followed. Do not release any information to the patient at any time. Refer all questions to your clinical instructor or the nurse caring for the patient.
3. Students will act courteously and respectfully when interacting with hospital personnel and not interfere with their work.
4. All assigned tasks are to be performed as specified following hospital and departmental policies and procedures. When in doubt of anything, ask your instructor.

New Jersey State Law

13:44F-3.2 Practice by trainees

(a) A trainee may perform those duties essential for completion of his or her clinical service, without having to obtain a license, provided the duties are performed under the direction of a physician, as defined in N.J.A.C. 13:44F- 3.1(b)1 and 2, and the supervision of a physician as defined in N.J.A.C. 13:44F-3.1(d), or under the direct supervision of a licensed respiratory care practitioner, as defined in N.J.A.C. 13:44F-5.1.

(b) The trainee shall, when performing duties pursuant to (a) above, wear a badge which identifies the person as a trainee. Additionally, the supervising licensee or physician shall inform the patient that the person rendering care is a trainee.

Clinical Site Safety and OSHA:

1. Safety precautions regarding physician orders, protocols, and medication administration are to be observed. Any discrepancy or lack of order must be reported to the instructor. Before performing any procedure, always check the patient's identification band for proper identification.
2. All procedures are to be reported and documented contemporaneous, factually, and truthfully.
3. All assigned tasks are to be performed as specified following the appropriate Procedural Competency Evaluations (PCE) and the American Association for Respiratory Care (AARC) Clinical Practice Guidelines (CPG). If there is a conflict with departmental or hospital policies, check with your instructor before performing the procedure. Be careful to conserve and protect all equipment and supplies. When in doubt of anything, always ask your instructor.
4. "Right to Know" in the educational setting and the clinical work place, respiratory care students will be working with equipment and materials and performing procedures that may result in injury or illness. Students must be informed what can be done to avoid injury or illness when working with these materials.
5. Students should be aware that in all health care facilities, respiratory care departments are required to maintain current policy and procedure manuals. These manuals will include infection control and blood borne pathogen plans, chemical hygiene plans and other "Right to Know" information.
6. Students are strongly encouraged to review these materials during their clinical rotations.
7. Before any clinical exposure, the student should be oriented to the facility. The orientation should include: the location of all equipment, waste and sharp disposal policies and procedures, the mechanism for reporting defective equipment, needle sticks or other injuries, the location of the respiratory department policy and procedure manual, and the Material Safety Data Sheets (MSDS). Needles should never be recapped! All sharps should be disposed of in the puncture proof containers. All needle sticks should be reported to the Clinical Instructor, Department Supervisor, and the Clinical Coordinator.
8. Students must adhere to all smoking policies.
9. Students must adhere to all departmental safety procedures regarding equipment. Any piece of defective equipment must be reported immediately to the clinical instructor and the department supervisor.
10. Students must utilize all personal protective equipment as required.

HIPPA Regulations:

All students will attend an annual training session on blood borne pathogens and HIPPA regulations prior to the start of clinical. Students are recommended to obtain the Hepatitis B vaccine or sign a waiver acknowledging that they have been informed about the vaccine and decline to be vaccinated at this time. Students may also be required to attend fire and safety, HIPPA, and infection control in-services at the clinical affiliates.

Physical Exam:

Before clinical begins, each student is required to have completed a standard physical exam to certify good health status. This is a school requirement. You will receive a notice from the school health nurse for compliance. All physician information must be brought to her for proper documentation. Testing for TB is required every six months. No student will be allowed to participate in clinical without a completed physical exam.

CPR Certification:

All students must possess a current valid Basic Life Support CPR card. Freshmen students will be certified in CPR prior to the start of clinical. This certification will take place in the Introduction to Respiratory Care Class (RSP-119). This is a two-year certification that will remain valid throughout the attendance in this program.

Personal and Malpractice Insurance:

The college provides a blanket malpractice insurance policy to cover the student throughout the two-year degree program. It is recommended that the student purchase additional malpractice insurance through a secondary malpractice insurance provider.

Students are required to have their own health insurance. For example, if a student is injured during their clinical experience and need to be seen in the emergency room, the student is responsible for the subsequent fees associated with the emergency department visit.

Documentation:

1. All students are required to sign in the chart with “BCC S.R.T” after their name. All student signatures must be co-signed by your clinical instructor. It is the student’s responsibility to show their work to their instructor and to see that it is signed off by their clinical instructor.
2. Anecdotal records must be filled out on a daily basis at the end of the clinical shift. This information will entered into the DataArc system by the student and validated by the respective clinical instructor. The Director of Clinical Education will periodically review that student records are maintained in the appropriate manner. In addition, they are

periodically reviewed by the Director of Clinical Education to ensure that positive and productive clinical sessions are taking place.

3. The student must fill in their name, date, time of clinical rotation, clinical site, instructor and any physician contact. All of the day's activities must also be recorded on the form. Express any positive or negative comments on the form as well. Make sure your clinical instructor validates this form.
4. The Director of Clinical Education will assign clinical schedules. No changes will be allowed without the permission of the Director of Clinical Education.

Evaluation of Clinical Skills:

1. Evaluation is a vital link in the teaching-learning process. When performed correctly, it helps the learner develop their skills, meet accountability and aids in student progression throughout the program.
2. Evaluations will be performed throughout the clinical rotations on both a formative and a summative process. Their instructor or the Director of Clinical Education and the Program Director as to their progress will provide each student with feedback. Strengths and weaknesses will be identified to ensure remediation if necessary.
3. When the student has mastered a procedure and feels that he / she is ready to be evaluated, they are to inform their instructor that they are ready to demonstrate the proper procedure without the instructor's intervention and assistance. If it becomes necessary, the clinical instructor will intervene either to safeguard the patient's welfare or to expedite completion of the procedure. If determined by the clinical instructor, it may be necessary for remediation of the student's performance, and a repeat clinical evaluation. It may also be necessary for the Director of Clinical Education to further evaluate the student.
4. Once a student has been satisfactorily evaluated on a specific task, they may also be required throughout the program to have subsequent repeat evaluations of the same task. If they are not able to perform a second or third evaluation of the same task, they will have to be remediated and reevaluated by the Director of Clinical Education.

Procedural Competency Evaluations:

1. The PCE is an acronym that stands for "Procedural Competency Evaluation". A procedural competency evaluation involves a demonstration of a specific respiratory care skill in conjunction with an assessment of the student's understanding and ability to apply the related theory. The specific task to be evaluated is identified on each PCE form. Additional copies may be required for a pre-clinical laboratory evaluation and subsequent clinical evaluations.

2. Each PCE or clinical evaluation instrument consists of a list of performance elements, definitions of acceptable performance, a scoring scheme, and a performance rating form. The performance elements are the specific behaviors to be evaluated.
3. Copies of the PCE's for each clinical rotation are provided by the DataArc system on the CD-ROM or online. A complete listing of the PCE's for each rotation is included in each clinical syllabi.
4. PCE's reflect the faculty's consensus judgment concerning the elements of a clinical procedure and the manner in which they are best performed. The procedural components are in compliance with the AARC clinical practice guidelines and other national standards. The emphasis is placed primarily on the performance aspects of the clinical procedures that define a competent respiratory care practitioner.
5. It might be necessary for your instructor to intervene on behalf of your patient selection for your PCE evaluation. Some patients are not always cooperative and may not want students working with them. If necessary, consult your clinical instructor before attempting a PCE evaluation.

Scoring and Comments:

1. Each PCE is evaluated in three (3) parts. A step-by-step procedure performance rated as satisfactory and unsatisfactory (minor and major). Student's comprehension and critical thinking abilities will be evaluated via oral questioning of the procedure, pertaining to the basic rationale, indications, contraindications, goals and hazards. Performance deficiencies such as unsatisfactory performance or comprehension of any specified deficiency is grounds for re-evaluation. Comments including errors of omission or commission, manual dexterity, communication skills safety, and patient rapport will be addressed in the summary performance evaluation and recommendations.
2. Detailed steps are required for each procedure. Occasionally the sequence may vary, but there is usually a critical order that the steps must be performed in.
3. The procedures are designed so that the student can select, obtain, assemble, verify function, and correct malfunctions of the required equipment and patient process for the procedure.
4. Students should review the critical steps prior to requesting to be evaluated so that they are familiar with the proper procedural steps. In addition, students should discuss with their instructor any points of confusion prior to the start of the PCE evaluation so that they can perform the procedure without assistance.
5. The PCE evaluation is either a pass or fail. If the clinical instructor determines a failure, the student may be remediated and a repeat evaluation will be conducted. If the student proceeds to fail a second time, this may be ground for dismissal from the program.

6. Students may be required throughout the program to repeat various PCE evaluations that they have previously been successfully evaluated on. This is to ensure complete knowledge of the PCE's.

Preclinical Evaluation:

1. Students are to be tested and evaluated in the lab setting first, followed by the clinical setting.
2. Critical procedures such as medication delivery, suctioning, arterial puncture, or mechanical ventilation will be evaluated in the lab first, and then in the clinical setting.
3. Each clinical institution will have the option of retesting the students in critical procedures prior to the procedure being applied in the clinical setting.
4. It is necessary for the direct observation of the student by the clinical instructor while the student performs the critical procedures until the PCE evaluation for that skill has been successfully completed.

Clinical Grading:

1. Students are to be evaluated by their clinical instructors at the end of each clinical rotation. The Director of Clinical Education reviews these evaluations. Students can comment on these evaluations or rebut them with the Director of Clinical Education. Students must electronically sign these evaluations. The DataArc system contains the electronic evaluation forms that are used throughout the program for the purpose of student evaluations.
2. Factors to be evaluated are: knowledge and comprehension, quality and quantity of clinical skills performance, punctuality, professionalism, patient and physician rapport, and oral and written communication skills.
3. Calculation of clinical grades will vary with each subsequent clinical course (see clinical syllabi).
4. The clinical instructors a specific course may conduct oral examinations (see oral examination evaluation form).
5. Final clinical grades will be calculated and issued by the Director of Clinical Education. Students must achieve a grade of 75% in order to pass clinical.
6. Students may be required in clinical to submit a written and oral case study. In some clinical courses, the case study may be presented to the medical director, program director, Director of Clinical Education, and clinical instructors. An example of the score sheet will be provided with the specific course.

Technical Standards:

Utilizes the application of scientific principles for the identification, prevention, remediation, research, and rehabilitation of acute or chronic cardiopulmonary dysfunction thereby producing optimum health and function. Reviews existing data, collects additional data, and recommends obtaining data to evaluate the respiratory status of patients, develop the respiratory care plan, and determine the appropriateness of the prescribed therapy. Initiates, conducts, and modifies prescribed therapeutic and diagnostic procedures such as: administering medical gases, resuscitation; providing support services to mechanically ventilated patients; maintaining artificial and natural airways; performing pulmonary function testing, hemodynamic monitoring and other physiologic monitoring; collecting specimens of blood and other materials. Documents necessary information in the patient's medical record and on other forms, and communicates that information to members of the health care team. Obtains, assembles, calibrates, and checks necessary equipment. Uses problem solving to identify and correct malfunctions of respiratory care equipment. Demonstrates appropriate interpersonal skills to work productively with patients, families, staff, and co-workers. Accepts directives, maintains confidentiality, does not discriminate, and upholds the ethical standards of the profession.

In order to achieve the goals of the program, students will be required to perform, practice, and verify mastery of the required competencies by utilizing a variety of skills, which include (but are not limited to) the following abilities on a regular basis:

Physical Standards:

1. Students will be required to perform the following tasks, including but not limited to, on a regular basis.
2. Apply and refine skills acquired in the classroom and laboratory settings to actual patients and situations in the clinical setting.
3. Demonstrate psychomotor skills in manipulating patients and equipment.
4. Crouch to locate and plug in electrical equipment.
5. Palpate pulses, locate arteries for puncture, and skin temperature.
6. Grasp syringes, laryngoscope, and endotracheal tubes.
7. Handle small and large equipment for storing, retrieving, and moving.
8. Hear verbal directions
9. Hear gas flow through equipment.
10. Kneel to perform CPR.
11. Lift up to 50 pounds to assist moving patients.
12. Manipulate knobs, dials, and equipment associated with diagnostic and therapeutic devices.

13. Perform simulated clinical procedures on classmates or mannequins.
14. Push and pull large wheeled equipment, i.e., mechanical ventilators or oxygen cylinders.
15. Provide and take responsibility for their own transportation to and from assigned clinical sites.
16. Reach 5 ½ feet above the floor to attach oxygen devices to the wall outlet.
17. Read typed, handwritten, computer information in English.
18. See patient conditions such as skin color, work of breathing, and mist flowing through the tubing.
19. Select, obtain, assemble, disassemble, correct malfunctions, perform maintenance and evaluate various pieces of medical equipment.
20. Stand for prolonged periods of time (e.g., to deliver therapy, check equipment).
21. Stoop to adjust equipment.
22. Communicate effectively in English to patients and other health care providers regarding patient goals and procedures.
23. Walk for extended periods of time within all areas of the clinical site.
24. Write to communicate in English pertinent information (e.g., patient evaluation data, and therapy outcomes).

Attitudinal / Mental Standards:

1. Accept and apply constructive criticism.
2. Adhere to institutional and programmatic policies.
3. Apply theory to clinical practice.
4. Calculate, analyze, interpret, and record numbers and physical data accurately.
5. Demonstrate self-direction and independent responsibility.
6. Display attitudes/actions consistent with the ethical standards of the profession.
7. Display empathy for patients.
8. Exhibit social skills necessary to interact effectively with patients, families, supervisors, and co-workers of the same or different cultures such as respect, politeness, tact, collaboration, teamwork, discretion.
9. Follow verbal and written instructions independently without critical errors.
10. Function safely, effectively, and calmly under stressful situations.

11. Maintain composure while managing multiple tasks simultaneously.
12. Maintain personal hygiene consistent with close personal contact associated with patient care.
13. Prioritize multiple tasks, establish goals, plan activities, and use time effectively.
14. Work in a positive, constructive manner with peers and instructors.

BERGEN COMMUNITY COLLEGE

Respiratory Therapy Program

Student Policies and Procedures

I have read and understand the policies and procedures of the Respiratory Therapy Program. I understand that I must comply with these policies and regulations. A violation of these policies and regulations will result in disciplinary action or dismissal from the Program.

I understand that in order to graduate from the Respiratory Therapy Program I must successfully pass the NBRC Secured CRT exam and the NBRC Secured SAE RRT Written exam, and that I will be taking the NBRC SAE Clinical Simulation exam prior to the end of program completion.

Date _____

Full Name (Print) _____

Signature _____