

MISSOURI HEALTH PROFESSIONS CONSORTIUM

Respiratory Care Practitioner Program



Student Handbook

Class of 2026

Dear Student,

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

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

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

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

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

Respectfully,

Valerie Norwood, MBA, RRT
MHPC RCP Program Director

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

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

TABLE OF CONTENTS

I.	INTRODUCTION TO THE RCP PROGRAM	1
A.	MHPC History and Overview	1
B.	MHPC Mission Statements	1
C.	RCP Program Organization	2
D.	Institutional Accreditation & Authorization	2
E.	NBRC Board Exam for Respiratory Care	3
F.	RCP Program Advisory Board	3
G.	RCP Program Mission and Vision	4
H.	RCP Program Philosophy	4
I.	Notice of Non-Discrimination	4
J.	MHPC RCP Title IX Statement	4
K.	Intellectual Pluralism	4
II.	RCP PROGRAM OVERVIEW	5
A.	RCP Program Information	5
B.	RCP Program Goal	6
C.	Student Program Learning Outcomes	6
D.	Technical Performance Standards	7
E.	RCP Essential Functions/Physical and Mental Standards	8
F.	RCP Program Advisors	9
G.	RCP Program Admission Criteria	9
H.	RCP Program Selection Process	10
I.	Mandatory Orientation	11
J.	RCP Program Faculty and Staff	11
K.	Criminal History Policy	13
L.	Drug Screening Policy	13
M.	Transfer Student Policy	13
III.	STUDENT SUPPORT SERVICES	14
A.	Academic Support and Counseling	14
B.	Access Services & ADA Accommodations	14
IV.	CURRICULUM	16
A.	RCP Program of Study	16
B.	RCP Course Descriptions	17
C.	RCP Program Academic Calendar	21
D.	Tuition and Fee Guidelines	22
E.	Estimated Itemized Expenses	23
F.	Professional Academic Standards	24
G.	Technical Skills, Performance, and Critical Demands	25
1.	General Job Description	25
2.	General Job Requirements	26
3.	Required Performance Demonstrations	27

H.	Methods of Instruction	28
1.	Course Workload	28
2.	Technology Requirements	28
3.	Online Student Expectations via Web Conference	29
I.	Transportation	30
J.	Employment	30
K.	Professional Development and Memberships	30
V.	PROGRESSION AND RETENTION	31
A.	Course Testing and Examinations	31
B.	Exam Review	32
C.	Grading Scale and Grade Requirements	32
D.	Withdrawal or Course Failure	32
E.	Disciplinary Action/Probation	33
F.	Program Dismissal	33
G.	Academic Grievance and Appeals	34
H.	Readmission Policy/Procedure	35
VI.	CLASSROOM, LABORATORY, AND CLINICAL POLICIES	37
A.	Emergency Information Record	37
B.	Cell Phones & Electronic Devices	37
C.	Faculty Communication	37
D.	Classroom Attendance and Policies	38
1.	Classroom Attendance	38
2.	Classroom Absence	39
3.	Inclement Weather	39
E.	Skills Laboratory Attendance and Policies	40
1.	Skills Practice	40
2.	Critical Safety and Professional Behavior	41
3.	Laboratory Remediation	43
F.	Clinical Overview	44
1.	Clinical Experience	44
2.	Clinical Education Evaluation Overview	44
3.	Malpractice and Professional Liability Insurance	46
4.	Site Affiliates and Contacts	46
5.	Site Availability	47
6.	Clinical Supervision and Authority	47
7.	Clinical Issues/Problems	48
8.	Clinical Incident/Accident Report	48
G.	Clinical Expectations and Policies	48
1.	Professionalism in the Clinical Setting	48
2.	Patient Confidentiality and the HIPAA Security Rule	49
3.	Use of Social Media	50
4.	Clinical Policies	51
5.	Additional Clinical Expectations	52
6.	Clinical Attendance	53
7.	Clinical Absence	53
8.	Clinical Remediation	53

H. Classroom/Clinical Lab Forms	55
1. Exemplary Performance Form	55
2. Grade Advisement Form	56
3. Reflective Exam Review Form	57
4. Plan for Success – Clinical Late Assignment	58
5. Plan for Success -- Clinical Learning Performance	59
6. Clinical/Lab Remediation Plan	60
7. Probation Notification	61
VII. STUDENT CONDUCT	62
A. Professional Conduct and Student Civility	62
B. MHPC Partner Colleges’ Student Code of Conduct	64
C. Academic Honesty and Honor Code	64
D. Use of Artificial Intelligence (AI) for Classroom Work	66
E. Conduct Policy Non-Compliance	66
F. Professional Appearance/Dress Code	67
VIII. HEALTH AND SAFETY GUIDELINES	68
A. Occupational Risks/Communicable Diseases	68
B. Exposure/Event Reporting	68
C. Health Maintenance and Extended Medical Leave	69
D. Use of Human Subjects for Training Purposes	69
E. Latex and Other Allergens	70
F. Clinical Vaccination Requirement	70
G. Immunization Guidelines	70
H. Tuberculosis Testing	71
I. Tuberculosis Symptoms Questionnaire	73
J. Health and Wellness Survival Guide	74
IX. STUDENT HANDBOOK FORMS	75
A. Handbook Policy/Clinical Lab Acknowledgement	75
B. Electronic Compliance Form (Authorization to Access/Use PHI)	76
C. Media Consent Form	77
D. Records Release/Consent to Release Information	78
E. Criminal Background Policy and Consent	79
F. Substance Abuse Policy and Testing Consent	81
G. Medical Marijuana Policy	83

INTRODUCTION TO THE RCP PROGRAM

MHPC History and Overview

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

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

MHPC Mission Statements

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

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

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

RCP Program Organization

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

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

Institutional Accreditation and Authorization

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



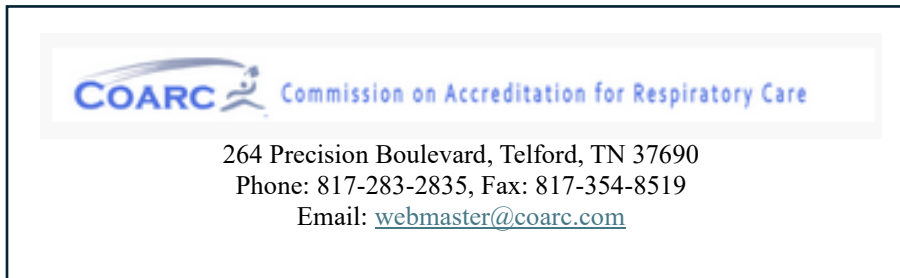
301 W. High Street (Suite 840, 860, 870, 580), Jefferson City, MO 65101
Phone: (573) 751-2361, Fax: (573) 751-6635, Email: info@dhewd.mo.gov

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



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The proposed Respiratory Care Practitioner Program (Program #200690) plans to offer an Associate's in Applied Science (AAS) Degree through each individual MHPC member community college. East Central College serves as the fiscal agent for the MHPC RCP Program and is located at 1964 Prairie Dell Road, Union, MO, 63084. *East Central College and the Missouri Health Professions Consortium are currently in the process of seeking CoARC accreditation for a Respiratory Care Practitioner Program; however, East Central College and the Missouri Health Professions Consortium can provide no assurance that accreditation will be granted by the CoARC.*



NBRC Board Exam for Respiratory Care

Individuals who successfully complete the Program are eligible to take the Therapist Multiple Choice (TMC) and Clinical Simulation Exam (CSE) administered by the National Board for Respiratory Care (NBRC). To obtain the NBRC *Certified Respiratory Therapist (CRT)* credential, graduates must pass the TMC with the low-cut score. In order to obtain the NBRC *Registered Respiratory Therapist (RRT)* credential, graduates must first pass the TMC at the high-cut score before then passing the CSE. More information can be found at the [NBRC's website](#).



RCP Program Advisory Board

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

RCP Program Mission and Vision

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

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

RCP Program Philosophy

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

Notice Of Non-Discrimination

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

MHPC Title IX Statement

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

Intellectual Pluralism

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

RCP PROGRAM OVERVIEW

RCP Program Information

The Respiratory Care Practitioner Program is a **72-credit hour** program (including pre-requisites) that encompasses general education coursework, professional-level coursework, classroom, laboratory practice, and clinical experiences in a variety of local hospitals and facilities. Once selected for admission into the program, students should complete the full-time RCP Program in one year. General education courses may be completed on a full-time or part-time basis prior to entering the program. Upon graduation, students receive an Associate of Applied Science Degree in Respiratory Care which prepares them to obtain the Registered Respiratory Therapy (RRT) credential. To be a Registered Respiratory Therapist (RRT) and to become state licensed as a Respiratory Care Practitioner, a student must successfully complete the Therapist Multiple Choice (TMC) and Clinical Simulation Exam (CSE) administered by the National Board for Respiratory Care (NBRC)

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

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

To complete the required laboratory component of the Program, it is important to note that students will be required to travel to either Columbia or Union one day each week, meeting face-to-face with an instructor. See below for information on lab sessions.

- MACC students attend lab sessions on the CMU (Central Methodist University) campus in Columbia.
- SFCC students attend lab sessions on the CMU (Central Methodist University) campus in Columbia.
- ECC students attend lab sessions on the ECC campus in Union.
- NCMC students attend lab session on the CMU (Central Methodist University) campus in Columbia.
- TRC students attend lab sessions on the ECC campus in Union.

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

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

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

RCP Program Goal

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

Student Program Learning Outcomes (PLOS)

- **Utilize Critical Thinking/Problem-Solving Skills**
Graduates will demonstrate proficiency in critical thinking and problem-solving to aid in the accurate diagnosis, effective management, and treatment of patients with cardiopulmonary diseases.
- **Evaluate Assessment Data and Apply Interventions**
Graduates will be able to systematically evaluate assessment data, apply appropriate interventions, and administer prescribed respiratory care to patients with cardiopulmonary diseases, ensuring optimal patient outcomes.
- **Demonstrate Technical Proficiency**
Graduates will exhibit technical proficiency in all required skills, performing their roles as Registered Respiratory Therapists safely and effectively.
- **Educate Various Stakeholders**
Graduates will possess the ability to foster health literacy by educating patients, their families, healthcare professionals, and community members on matters related to cardiopulmonary wellness, disease prevention, and management.
- **Communication Skills**
Graduates will recognize, demonstrate, and apply written and oral communication skills essential for effective interaction in the healthcare setting. This includes communicating with patients, colleagues, and other healthcare professionals.
- **Professional Ethics and Legal Compliance**
Graduates will recognize, demonstrate, and apply written and oral communication skills essential for effective interaction in the healthcare setting. This includes communicating with patients, colleagues, and other healthcare professionals.

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

Technical Performance Standards

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

RCP Essential Functions/Physical and Mental Standards

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

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

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

RCP Program Advisors

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

RCP Program Admission Criteria

For acceptance consideration into the MHPC Respiratory Care Practitioner Program, a student should **apply for and be admitted to a MHPC partner college and also complete the MHPC Respiratory Care Practitioner Program Application**. The completed application along with the \$30 application fee receipt should be submitted to East Central College Respiratory Care Program at 1964 Prairie Dell Road, Suite 105, Union, MO, 63084

Applicants must also meet the minimum criteria listed below.

- **Minimum cumulative GPA of 2.5 or greater on a minimum of 12 credit hours of college credit.** (A GPA of 3.0 or higher is suggested.)
- **TEAS Admission Test Score of 58% or greater in the last two years. *It is the student's responsibility to provide our office with a copy of his/her TEAS results.*** The TEAS exam is designed to assess a student's academic and personal readiness for higher education in a healthcare-related field, such as Respiratory Care. The test is an internet-based, timed, multiple-choice test evaluating a student's knowledge in the following categories: English language, grammar, vocabulary, math, human anatomy & physiology, life & physical sciences, and scientific reasoning. Tests are not individually timed during testing. A student will have 4-1/2 hours to complete the test, so pacing oneself is very important. Students will need to schedule the exam at the campus testing center that has been identified as their “home” campus. More information regarding the TEAS exam can be found on the MHPC/ECC website at <https://www.eastcentral.edu/allied-health/respiratory-care/>. Please reach out to the “home” campus pre-Respiratory Care advisor for more information.
- **Pre-requisite coursework completed with a “C” or better.** Pre-requisite coursework ***must be completed by the end of the Summer Semester (August) before Fall admission into the program.*** (See the curriculum page in this Application Packet for more details.) All science courses must be no older than 5 years at the time of acceptance.
- **Minimum of 8 hours observation with an RRT.** Observation must be completed at a hospital, skilled nursing/long term care facility, or pulmonary function laboratories.
- **Three (3) appropriate references on file.** (See application for guidelines regarding references).

- **Official transcripts received and evaluated for the program, as well as proof of enrollment, if coursework is taken at another institution.** Applications will not be considered if official transcripts have not been evaluated by June 1st.

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

- **Satisfactory Drug Screening.** The testing site is determined by MHPC RCP Program.
- **Satisfactory Medical Examination.** Applicants must be in a state of physical and mental health compatible with the responsibilities of a Registered Respiratory Therapist. A physical examination, including selected diagnostic tests and immunizations, is required after Program acceptance at the cost of the applicant. (The examination form is provided in the acceptance packet and is to be completed by the Healthcare Professional.)
- **Satisfactory Fingerprint/Criminal Background Check.** (Family Care Safety Registry form will be included in the Application Packet.)
- **Current CPR Card** from either the American Heart Association (BCLS-C) for Healthcare Providers (Basic Cardiac Life Support), or the American Red Cross CP for The Professional Rescuer.

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

RCP Program Selection Process

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

Applicants are ranked using the same admission criteria and selection procedures, and rankings are grouped by clinical lab location in order to meet accreditation standards regarding student/faculty ratios for lab. Three Rivers College (TRC) applicants attend weekly clinical labs at East Central College (ECC) in Union and therefore applicants from those two campuses will be ranked as a group. North Central Missouri College (NCMC), Moberly Area Community College, and State Fair Community College (SFCC) students attend weekly labs in Columbia and therefore applicants from those three campuses will be ranked as a group.

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

Coursework Completed	TEAS Exam	GPA	RRT Observations
Grade from Anatomy & Physiology I&II if completed by May 31 st with a “C” or better. 3 = A 2 = B 1 = C <i>No points will be given for courses that have been retaken due to course failure.</i>	Individual Composite Score 0 = 58.0 2 = 58.1 - 63.0 4 = 63.1 - 68.0 6 = 68.1 - 73.0 8 = 73.1 - 78.0 10 = >78.1	Pre-requisite college GPA of a minimum of 12 credit hours of college credit 0 = 2.5 2 = 2.56 – 2.75 4 = 2.76 – 2.99 6 = 3.0 – 3.5 8 = 3.6 – 4.0	A minimum of 8 hours of RRT observation at a skilled nursing/long-term care facility, hospital, or pulmonary function lab is required. 0 = 8 hours 2 = 16 hours 4 = 24 hours <i>Other clinical facilities can be utilized after the minimum requirement is met.</i>

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

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

The MHPC Respiratory Care Practitioner Program office will notify the candidates of the Admission Committee decision by email as to whether or not they are selected for the RCP Program admission. Students selected for the Respiratory Care Class will be required to complete the Respiratory Care Admissions Packet items (drug screen, background check, physical exam, immunizations, etc) during the summer semester prior to beginning Respiratory Care Classes in August.

Mandatory Orientation

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

RCP Program Faculty & Staff

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

an appointment with a student at either the student's or instructor's request. If the student is unable to keep the appointment, the student is expected to notify the instructor as soon as possible.

PROGRAM DIRECTOR:

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636-584-6616

DIRECTOR OF CLINICAL EDUCATION:

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MEDICAL DIRECTOR:

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TBD

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660-357-6284

Will Cooper
Three Rivers College
wcooper@trcc.edu
573-840-9682
(Part-time Only)

Criminal History Policy

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

Drug Screening Policy

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

Transfer Student Policy

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

STUDENT SUPPORT SERVICES

Academic Support and Counseling

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

East Central College

- [Learning Center](#)
- [Wellness & Counseling Services](#)

Moberly Area Community College

- [Counseling & Community Resources](#)
- [Tutoring Services](#)

North Central Missouri College

- [Tutoring Center](#)
- [Health Wellness & Safety](#)
- [Counseling Services](#)

State Fair Community College

- [SFCC Cares Health and Wellness Services](#)
- [Tutoring Services](#)

Three Rivers College

- [Tutoring](#)
- [Health & Safety](#)

Access Services and ADA Accommodations

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

East Central College

- [Access Services](#)

Moberly Area Community College

- [Access and ADA](#)

North Central Missouri College

- [Accessibility Services](#)

State Fair Community College

- [Disability Resource Center](#)

Three Rivers College

- [Disability Services](#)

CURRICULUM/COURSEWORK

RCP Program of Study

Pre-requisite/General Education Coursework: 28 Credit Hours

(See “home” campus for course equivalencies.)

COL 101	Falcon Seminar (First Year Experience)	1
ENG 101	English Composition I	4
CORE 42	Civics	3
PSC CIVICS	Civics Achievement Exam	0
CORE 42	Oral Communications	3
MTH 110 (or higher)	Int Algebra, Contemporary Math, Statistics	3
BIO 206	Anatomy and Physiology I Lecture and Lab	4
BIO 207	Anatomy and Physiology II Lecture and Lab	5
HSC 113	Medical Terminology	3
PSY 101	General Psychology	3

Professional Coursework: 44 Credit Hours

Fall 15 Credit Hours:

RSC 101	Fundamentals of Respiratory Care	3
RSC 105	Introduction to Respiratory Disease	3
RSC 110	Respiratory Physiology	3
RSC 115	Respiratory Equipment & Therapeutics	3
RSC 120	Respiratory Care Clinical I	2
RSC 121	Respiratory Care Lab I	1

Spring 14 Credit Hours:

RSC 150	Advanced Respiratory Care	3
RSC 155	Mechanical Ventilation	3
RSC 160	Cardiopulmonary Diagnostics	3
RSC 165	Respiratory Pharmacology	2
RSC 170	Respiratory Care Clinical II	2
RSC 171	Respiratory Care Lab II	1

Summer 15 Credit Hours:

RSC 201	Neonatal & Pediatric Respiratory Care	3
RSC 205	Specialized Respiratory Procedures	3
RSC 220	Respiratory Care Clinical III	2
RSC 221	Respiratory Care Lab III	1
RSC 250	Respiratory Care Clinical IV	2
RSC 251	Respiratory Care Lab IV	1
RSC 291	Respiratory Care Capstone	3

RCP Course Descriptions

RSC 101 Fundamentals of Respiratory Care

** This course introduces foundational concepts of respiratory therapy and begins the development of a knowledge base necessary to succeed as a skilled respiratory therapist. The history of respiratory care as well as the profession will be examined. The principles of quality care, infection prevention, and ethical and legal issues associated with the delivery of respiratory care will be discussed in detail. The principles of physics and chemistry will be presented in relation to oxygen and carbon dioxide transport and gas exchange. There will also be a brief introduction to research in respiratory care.

RSC 105 Introduction to Respiratory Disease

** This course provides information on various diseases that affect the lung and are commonly encountered by respiratory therapists in daily practice. Each disease is discussed in terms of its pathophysiology, etiology of the disease process, and cardiopulmonary clinical manifestations associated with the disorder. Students will have a chance to discuss disease management and prognosis associated with acute and chronic illness. As part of the learning process, students will be assigned to develop a case report focusing on a patient they have personally worked with during their clinical practicum. The assignment is designed to hone information gathering and decision-making skills in the diagnosis and treatment of patients with cardiopulmonary or related disorders.

RSC 110 Respiratory Physiology

** This course will introduce the student to normal anatomy and physiology of the cardiopulmonary system. Students will focus on the etiology and treatment of both pulmonary and cardiac diseases, with emphasis on the pulmonary system. Diagnostic systems commonly used in the hospital to evaluate these systems will also be discussed. Topics include the respiratory system, ventilatory mechanics, gas transport and blood flow. Emphasis will be on the importance of the heart-lung relationship.

RSC 115 Respiratory Equipment & Therapeutics

** This course introduces the basic therapeutics of respiratory care. Students will be taught patient assessment techniques designed to evaluate therapy effectiveness and patient progress. Therapeutic modalities are presented to help students understand the principles of application to patients, indications, contraindications, and hazards, and to gain familiarity and experience with initiation of basic respiratory therapeutics. Emphasis will be on theory and operation as well as troubleshooting and reprocessing of equipment. Students will be hands-on with equipment, devices, and techniques that are essential for providing basic respiratory care to patients with cardiopulmonary dysfunction.

RSC 120 Respiratory Clinical I

** Students will work under the direct supervision of a clinical instructor or preceptor. This is an introductory clinical experience for the student to practice the respiratory care skills obtained in RSC 121. The student will perform direct patient care by evaluating patients' medical records, assessing patients and administering basic care including oxygen therapy, humidity and aerosol therapy, hyperinflation therapy, and bronchial hygiene therapy. Students will interact with members of the healthcare team to optimize the patient's care management. Students will also have the opportunity to disinfect and reprocess equipment and may be involved in emergent medical situations to include cardiopulmonary resuscitation and the use of manual resuscitators. Students may also be exposed to emergent bedside procedures such as thoracentesis, bronchoscopy, and intubation.

RSC 121 Respiratory Lab I

** This course provides hands-on experience for students to apply the cognitive knowledge they have gained in their introductory courses to simulated hospital and patient care experiences. The student will develop psychomotor skills to enhance their confidence as they prepare for hospital clinical rotations and

working with actual patients. The basic clinical competencies taught in introductory courses are studied and practiced in the simulation setting with peer and instructor feedback to improve technique. Competencies can be completed in the Clinical Practicum setting as time and resources permit.

RSC 150 Advanced Respiratory Care

** This course introduces students to the concepts of critical care. Students will be exposed to all aspects of providing respiratory care in high acuity situations in the intensive care unit, emergency department, rapid response situations, and inter/intra-hospital transport of patients requiring ventilatory support. Covered material includes resuscitation, intubation/ventilation/weaning/extubation, stabilization, hemodynamic monitoring, arterial lines/blood gas analysis, and non-invasive ventilation. Students will be hands-on with equipment, devices, and techniques that are essential for providing high level respiratory care to patients in need of intensive care. At the end of this course, students will have the ability and confidence to effectively manage critically ill respiratory patients.

RSC 155 Mechanical Ventilation

** This course is an introduction to mechanical ventilation. The focus will be on ventilator classification, principles and operational characteristics of the equipment that is currently available in the market. Invasive and non-invasive ventilation techniques will be covered. Students will learn about indications for mechanical ventilation, complications of positive pressure ventilation, and the physiologic effects of mechanical ventilator use. As students' progress through the course, they will acquire knowledge in ventilator initiation as well as ongoing patient/ventilator management. Students will gain an understanding of the critical importance of patient assessment for weaning, and practice techniques for liberating patients from ventilatory support.

RSC 160 Cardiopulmonary Diagnostics

** This course is designed to increase the respiratory students' knowledge and understanding of cardiopulmonary diagnostic assessment. Standard diagnostic testing and assessments are presented to include physical examination, blood chemistries and hematology, imaging studies, pulmonary function testing, bronchoscopy, thoracentesis, electrocardiograms, and hemodynamics. At the end of this course, students will have the ability to know which assessments/testing to use when evaluating a patient, and how to analyze the data gathered from these assessments to appropriately evaluate their patients and detect potential problems.

RSC 165 Respiratory Pharmacology

** This course is designed to increase the respiratory student's knowledge and understanding of medications used in therapeutic management of patients with cardiopulmonary disease. The course is a study of the properties, effects, and therapeutic value of the medications most commonly used in the practice of respiratory care. At the end of this course students will understand drug classification, routes of administration, dosage calculations and physiological interactions.

RSC 170 Respiratory Care Clinical II

**Students will work under the direct supervision of a clinical instructor or preceptor. This second clinical practicum is an opportunity for the student to gain clinical experience and additional clinical practice for the respiratory care skills obtained in their Mechanical Ventilation and Advanced Respiratory Care courses. The student will perform direct patient care by evaluating patients' medical records, assessing patients and administering basic care including oxygen therapy, humidity and aerosol therapy, hyperinflation therapy, and bronchial hygiene therapy. Students will interact with members of the healthcare team to optimize the patient's care management. Students will also have the opportunity to perform blood gas puncture and analysis, and practice airway management skills. The student may be involved in emergency medical situations such as cardiopulmonary resuscitation and the use of manual resuscitators. Students will begin caring for patients needing ventilatory support, and this will provide students with opportunities to begin

working with non-invasive positive pressure machines as well as providing some limited exposure to mechanical ventilators.

RSC 171 Respiratory Lab II

** This course provides hands-on experience for students to apply the cognitive knowledge they've gained in previous courses to simulate hospital and patient care experiences. The student will develop psychomotor skills to enhance their confidence as they begin their hospital clinical rotations and work with actual patients. The clinical competencies taught in concurrent courses are studied and practiced in the simulation setting with peer and instructor feedback to improve technique. Competencies can be completed in the Clinical Practicum setting as time and resources permit.

RSC 201 Neonatal & Pediatric Respiratory Care

** This course introduces care concepts and skills for providing respiratory therapy to the neonatal/pediatric population. Learning emphasis is placed on the knowledge and skills needed to assess and treat the neonatal/pediatric patient including the development and physiology of the fetal and neonatal lung, perinatal circulation, and neonatal/pediatric pulmonary disorders. The curriculum focuses on respiratory care techniques, airway management, mechanical ventilation, and drugs/dosages appropriate for treatment of neonatal and pediatric patients.

RSC 205 Specialized Respiratory Procedures

** This course provides an opportunity for the advanced respiratory therapy student to observe and, in several cases, participate in special diagnostic procedures that are commonly used to assess cardiopulmonary patients. The course is an introduction to areas that require further training and competency before students are ready to practice in those areas, but it may provide insight as to the options students will have upon graduation. At the completion of this course, students will be able to clearly define the diagnostic information that can be obtained through these specialized procedures, and how that information is used to inform the patient's care plan.

RSC 220 Respiratory Care Clinical III

** Students are assigned to a clinical site for a total of 8 weeks and will work under the direct supervision of a clinical instructor or preceptor. This third clinical practicum is an opportunity for the student to gain clinical experience and additional clinical practice for the respiratory care skills obtained in their Mechanical Ventilation and Advanced Respiratory Care courses. The student will perform direct patient care by evaluating patients' medical records, assessing patients, and administering basic care including oxygen therapy, humidity and aerosol therapy, hyperinflation therapy, and bronchial hygiene therapy. Students will interact with members of the healthcare team to optimize the patient's care management. Students will also have the opportunity to perform blood gas puncture and analysis, and practice airway management skills. The student may be involved in emergency medical situations such as cardiopulmonary resuscitation and the use of manual resuscitators. Students will also rotate in the adult ICU and provide care to patients who require advanced respiratory care and ventilatory support. Students will also have the opportunity to provide care to pediatric patients with breathing difficulties.

RSC 221 Respiratory Lab III

** This course provides hands-on experience for students to apply the cognitive knowledge they have gained in previous courses to simulate hospital and patient care experiences. The student will develop psychomotor skills to enhance their confidence as they continue hospital clinical rotations and working with actual patients. The advanced clinical competencies taught in concurrent courses are studied and practiced in the simulation setting with peer and instructor feedback to improve technique. Competencies can be completed in the Clinical Practicum setting as time and resources permit.

RSC 250 Respiratory Care Clinical IV

** Students are assigned to a clinical site for a total of 8 weeks and will work under the direct supervision of a clinical instructor or preceptor. This fourth clinical practicum is an opportunity for the student to gain advanced clinical experience and additional clinical practice in providing care to critically ill adult, pediatric, and neonatal patients. The student will also be exposed to specialty diagnostic equipment and may assist physicians with procedures such as bronchoscopy and thoracentesis. Students will learn about pulmonary function testing and increase their knowledge of cardiopulmonary stress testing and ECG testing.

RSC 251 Respiratory Lab IV

** This course provides hands-on experience for students to apply the cognitive knowledge they've gained in previous courses to simulate hospital and patient care experiences. The student will continue their development of psychomotor skills with advanced and specialty procedures to enhance their confidence as they prepare for graduation and employment. The advanced clinical competencies taught in concurrent courses are studied and practiced in the simulation setting with peer and instructor feedback to improve technique. Competencies can be completed in the Clinical Practicum setting as time and resources permit.

RSC 291 Respiratory Care Capstone

**This is a summation course designed to prepare the student for the National Board for Respiratory Care (NBRC) Therapist Multiple-Choice Examination (TMC) and the Clinical Simulation Examination (CSE). Topics include licensure, certification, and registration procedures. Material from all previous coursework is reviewed with an emphasis on problem solving scenarios. Participants will have access to the TMC and CSE practice exams. Advanced lifesaving certifications will be earned during this review course, and participants will also have the opportunity to develop a professional portfolio highlighting their employability skills as they transition from student to professional.

RCP Program Academic Calendar

The MHPC Respiratory Care Program does not run on the same academic calendar as traditional college programs. ***Students should refer to their “home campus” academic calendar for enrollment and drop dates.*** The academic calendar for the Respiratory Care Class of 2025 is as follows:

Fall Session 2025	16-week	First 8-week	Second 8-week
Classes Begin	August 18, 2025	August 18, 2025	October 13, 2025
Labor Day (Closed)	September 1, 2025	September 1, 2025	
Fall Break (Closed)	October 9-10, 2025	October 9-10, 2025	
Thanksgiving Break (Closed)	November 26-28, 2025		November 26-28, 2025
Final Exams	December 2-9, 2025	October 8, 2025	December 2-9, 2025
Classes End	December 2, 2025	October 8, 2025	December 2, 2025

Spring Session 2026	16-week	First 8-week	Second 8-week
Classes Begin	January 5, 2026	January 5, 2026	March 2, 2026
Martin Luther King (Closed)	January 19, 2026	January 19, 2026	
Spring Break (Closed)	March 16-20, 2026		March 16-20, 2026
Spring Holiday (Closed)	April 3, 2026		April 3, 2026
Final Exams	April 20-24, 2026	February 27, 2026	April 20-24, 2026
Classes End	April 24, 2026	February 27, 2026	April 24, 2026

Summer Session 2026	16-week	First 8-week	Second 8-week
Classes Begin	April 27, 2026	April 27, 2026	June 22, 2026
Memorial Day (Closed)	May 25, 2026	May 25, 2026	
Independence Day (Closed)	July 3, 2026		July 3, 2026
Final Exams	August 10-14, 2026	June 15-19, 2026	August 10-14, 2026
Classes End	August 14, 2026	June 19, 2026	August 14, 2026

Tuition And Fees Guidelines

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

General:

- Students will be billed for all tuition and fees through the home campus registrars and cashiers as established by community college specific policies and procedures.
- Students matriculated into the Consortium program will enroll at the student's "home campus" community college and will pay the required tuition and fees to the home campus.
- All pre-requisite general education and science coursework taken prior to a student's formal admission to the Consortium program shall be paid in the same manner as other native students attending the "home" community college campus.

Financial Aid:

- It is generally understood that once admitted to the Consortium program, students are counted and reported as students of the "home" community college. This process shall determine the student "home-campus" for federal and state financial aid eligibility and account service. It is the intent of this Consortium agreement that all financial aid services shall be provided by the "home" community college.
- Refund Policies of MHPC Community College Partners
 - [ECC Refund Policies](#)
 - [MACC Refund Policies](#)
 - [NMCB Refund Policies](#)
 - [SFCC Refund Policies](#)
 - [TRC SR 2750 Return of Title IV Information](#)

Non-Curricular Student Activities and Events:

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

Estimated Itemized Expenses

Tuition and Fees for the MHPC RCP Program (professional coursework) will be higher than general education costs at the home campus. This is an *estimate* of student costs associated with the Program, including tuition, books, supplies, immunizations, training/certifications for the Class of 2026.

Student Fees Paid to East Central College	
A Non-refundable Application Fee	\$30
A Non-refundable Admission Packet Fee <ul style="list-style-type: none"> • Drug Screen • Missouri Family Care Registry (FCRS) Background Screening • Student Liability Insurance 	\$150
Student Fees Paid to Vendor	
Physical Exam & Immunizations (estimate)	\$200
AHA “BLS for Healthcare Providers” Certification	\$100
AHA “ACLS” Advance Cardiac Life Support	\$100
AHA “PALS” Pediatric Advance Life Support	\$100
AHA “NALS” Neonatal Advanced Life Support and/or “NRP” Neonatal Resuscitation Program	\$100

FALL SEMESTER: 15 Credit Hours	
MHPC Tuition, Support Services/Student Activity/Tech/Facilities/Security Fees	\$ 4,170.00
Lab Supply Fee (RSC 121)	100.00
AARC/MSRC Student Membership (RSC 101)	25.00
Books (approximate, purchased through home campus bookstore)	1,200.00
Watch w/2nd Hand, Uniforms (2), Lab Coat, Shoes, Stethoscope, etc.	300.00
Total Fall Semester:	\$ 5,795.00
SPRING SEMESTER: 14 Credit Hours	
MHPC Tuition, Support Services/Student Activity/Tech/Facilities/Security Fees	\$ 3,892.00
Lab Supply Fee (RSC 171)	100.00
AARC/MSRC Student Conference Fee (RSC 150)	200.00
Books (approximate, purchased through home campus bookstore)	600.00
Total Spring Semester:	\$ 4,792.00
SUMMER SEMESTER: 15 Credit Hours	
MHPC Tuition, Support Services/Student Activity/Tech/Facilities/Security Fees	\$ 4,170.00
Lab Supply Fee (RSC 221,251)	200.00
Books (approximate, purchased through home campus bookstore)	500.00
HESI Practice Assessment Fee (RSC 291)	85.00
TMC & CSE (certification exams RSC 291)	390.00
TMC & CSE Review Course (<i>Student’s Responsibility</i>)	250.00
Graduation Fees (Estimate)	75.00
Total Summer Semester:	\$5,670.00
Total Estimated Program Costs:	\$16,257.00

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

Tuition & Fees listed above are for 2025-2026 and are paid directly to the home campus, subject to change each year. Specific tuition and fee rates may vary by campus but the total cost to the student remains the same regardless of home campus assignment. Total tuition and fee rates include tuition, professional program/course fees, student activity fees, technology fees and support services fees. They do not vary based on student designation of in/out of district. **All other costs (books, immunizations, screenings, supplies, etc.) are only an approximation.** Program costs above do not include ordinary costs of daily transportation, living expenses, childcare, and health insurance. Transportation costs to travel to home campus, clinical lab and/or clinical sites are not included in the estimated expenses above.

Professional Academic Standards

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

- ***Students are encouraged to seek help from their instructors and their faculty advisors when academic problems arise.***
- Students continue to have access to their home campus services such as the Learning Center and Counseling Services.
- Faculty members may involve home campus representatives to address violations of Program policies or to address concerns related to student behavior and academic performance.
- The Program Director may develop a learning contract in cases where a student is in violation of academic or professional standards.
 - A student is allowed **one learning contract in an 8-week** period, and **two learning contracts in a 16-week** period. Consequences related to breach of contract are specified in the individualized student learning contract to promote awareness and transparency.

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

Students are expected to read the course materials and complete the course work on time. Unprofessional behavior or poor academic performance in either general education or professional coursework can result in dismissal from the professional program. ***Academic performance standards require students to maintain a minimum overall 2.5 GPA or greater and individual course grades may not fall below a 'C' to progress through the Program.***

- Because the Program is sequential, students will not be allowed to progress to the next semester without successfully completing the preceding semester requirements and will subsequently be dismissed from the program if unable to maintain minimum standards of performance.
- Students must achieve a cumulative GPA of 2.5 or greater for professional coursework to graduate from the Program.
- Students must successfully complete all clinical requirements within a timely manner.

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

Technical Skills, Performance and Critical Demands

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

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

General Job Description:

- Utilizes the application of scientific principles for the identification, prevention, remediation, research and rehabilitation of acute or chronic cardiopulmonary dysfunction thereby producing optimum health and function
- Reviews existing data, collects additional data, and recommends obtaining data to evaluate the respiratory status of patients, develop the respiratory care plan, and determine the appropriateness of the prescribed therapy
- Initiates, conducts, and modifies prescribed therapeutic and diagnostic procedures such as administering medical gases, humidification and aerosols, aerosol medications, airway clearance therapy and cardiopulmonary resuscitation
- Provides support services to mechanically ventilated patients, maintaining artificial and natural airways
- Performs pulmonary function testing, hemodynamic monitoring, and other physiologic monitoring.
- Collects specimens of blood and other materials

- Documents necessary information in the patient's medical record and on other forms, communicating that information to members of the health care team
- Obtains, assembles, calibrates, and checks necessary equipment
- Uses problem solving to identify and correct malfunctions of respiratory care equipment
- Demonstrates appropriate interpersonal skills to work productively with patients, families, staff and co-workers
- Functions safely, effectively, and calmly under stressful situations
- Maintains composure while managing multiple tasks simultaneously
- Prioritizes multiple tasks
- Accepts directives, maintains confidentiality, does not discriminate, and upholds the ethical standards of the profession

General Job Requirements:

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

- Demonstrate the mental capacity to assimilate, analyze, synthesize, integrate concepts and problem solve to perform therapeutic interventions.

Required Performance Demonstrations:

The graduate's performance requires demonstration of the knowledge, ability, and initiative to perform as a Respiratory Therapist as outlined in the general job description. To achieve the necessary requirements for issuance of an Associate in Applied Science Degree in Respiratory Care, ***the graduate must perform the following required competencies in lab and clinic with or without reasonable accommodation:***

- Hand washing and Isolation Procedures
- Vital Signs and Pulse Oximetry
- Resuscitation
- Assisting Intubation
- Auscultation NPA Insertion and NT Suctioning
- OPA Insertion and Manual
- Advanced Physical Assessment
- CXR Interpretation
- Oxygen Supply Systems
- Oxygen Administration
- Small Volume Nebulizer Therapy
- MDI Administration
- DPI Administration
- Incentive Spirometry
- Initiation/Monitoring Non-Invasive Ventilation
- Humidity and Aerosol Therapy
- Chest Percussion and Postural Drainage
- HFCWO (Vest) Therapy
- Arterial Puncture
- Mechanical Ventilation
 - Initiation of Volume Control
 - Initiation of Pressure Control
 - Initiation of Pressure Support
 - Endotracheal Suctioning
 - Spontaneous Breathing Trial
 - Extubation
 - Positive Expiratory Pressure Therapy
 - Ventilator Graphics Analysis
- Tracheostomy Care
- Bedside Bronchoscopy

Methods Of Instruction

Course Workload:

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

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

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

All Respiratory Care classes and labs are held Monday-Friday during daytime hours using asynchronous and synchronous modalities via distance technology and Canvas. Clinical rotations mirror an 8, 10, or 12-hour shift at the hospital. Most affiliates begin the dayshift between 6:00-7:00am. Clinical is generally scheduled Monday-Fridays with the actual days varying from semester to semester and the student’s individual schedule. ***The DCE reserves the right to schedule students on weekends, evenings, or outside of the normal college schedule if necessary.*** Students are not allowed to make requests for certain days and/or locations.

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

Technology Requirements:

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

Students will need the following software or apps:

- Adobe Reader and Flash Plug-in as well. These can be easily downloaded from the web at www.adobe.com/downloads/.
- Microsoft Office can be easily downloaded using your school email address at <https://www.microsoft.com/en-us/education/products/office>.
- Scanning device or scanning app on their phone.

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

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

Online Student Expectations via Web Conference:

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

- All students will be logged into the web conference platform at least 5 minutes prior to the scheduled class time. The instructor will provide the link or instructions for logging or calling in.
- Students will be considered tardy if they are not logged into the class with a camera on at the start of the scheduled class time.
- Students must have either a laptop with a camera or a web-camera. Students will log into the class using a web camera or laptop camera to be considered ‘present’. ***Using a cell phone for web conference classes is not permitted without prior approval by the instructor in extenuating circumstances.***
- Students should mute their audio upon entrance into the class and a camera should be on to allow instructors and classmates to see one another. Muting will minimize the background noise or students talking over the instructor or each other. (You should not be in a dark room; the instructor and classmates should be able to see your face.)
- Students should be mindful that when using the web camera, everyone can see everyone else. Proper attire as per the student handbook is expected.
- If a student needs to leave the class early or disable their camera, he/she should notify the instructor.
- Students may unmute their microphone to ask a question, type questions into the chat link or raise their hand at any time depending on instructor preference.
- Students should make every attempt to secure daycare arrangements for children, assure pets are fed/walked, and family knows that you are “in class.”
- During class breaks, students do not need to log off and can step away from the computer but return ready at the time given.
- If you have internet connection problems, please reach out to the instructor.
- ***Classroom Behavior:*** Students are expected to treat staff and faculty with respect and dignity. Students should refrain from talking when the instructor begins class/lecture/instruction. If the student has questions, they should direct questions to the instructor. Students may be required to leave microphones open during distance education sessions to ensure that there are no side conversations during lectures.

Transportation

Students are expected to provide their own transportation to and from each clinical site. The term “clinical site” shall include any facility which has been selected to provide practice and/or observation experiences. ***Students may travel up to 150 miles one way for clinical and/or lab rotations.*** It is the student's responsibility to obtain transportation to and from all activities required by the Program to be successful.

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

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

Employment

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

- Students are **not allowed** to work a night shift prior to a clinical experience. It is **strongly recommended** that a student refrain from working a night shift prior to classroom and lab experiences.
- Being late, absent, or leaving early from class, lab, or clinical due to employment is not acceptable and will be considered an absence.
- Students must not be compensated for clinical coursework while in an employee status role at a clinical affiliate site unless they are enrolled in an apprenticeship program. Participation in the “Earn While You Learn” program allows the student to receive credit for clinical coursework while also receiving compensation for clinical hours. Program participation is at the discretion of the faculty, and students may never be substituted for a licensed professional.

Professional Development and Memberships

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

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

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

PROGRESSION AND RETENTION

Course Testing and Examinations

- Routine examinations are administered utilizing adaptive testing and software, requiring online proctoring via Proctorio, a secure exam proctoring tool.
- A student who is experiencing internet or computer issues should go to the “home” campus to take an exam.
- Examinations begin at the established time and a student who is late may not join the exam once it begins.
- ***During testing, cameras MUST always be on – NO EXCEPTIONS.*** Failure to do so will place a student at risk of receiving a “0” for the exam.
- All hats, hoods, and Bluetooth devices must be removed. At the faculty’s discretion, a student may be required to remove other articles of clothing and/or accessories.
- Students may not have any type of electronic devices in their possession during testing such as cell phones, smart watches, laptops, or tablets.
- Students may not use an additional calculator during the examination. (A calculator is embedded within the computerized exam software.)
- To be excused from an exam, the student must notify the instructor ***before*** class time. If the instructor is unavailable, the RCP Program Administrative Assistant may instead be notified. The instructor may deny the student the opportunity to make up the examination if these guidelines are not met.
- The missed exam must be rescheduled within 48 hours. Students who fail to make prompt arrangements are at risk of receiving a “0” for the examination.
- Upon the discretion of the instructor, only ***one (1) examination per course per semester is eligible for makeup.*** Any subsequent examination missed will be given the grade of “0”.
- A “pop quiz” may not be made up, as this negates the purpose of the quiz. The grade of the quiz missed will be recorded as “0”. If a student arrives late for class and the quiz has already begun, the student will not be allowed to take the “pop quiz” and will receive a “0”. In general, a pop quiz will not be greater than 10 points on any given lecture day.
- Faculty will provide feedback to students in a variety of methods. Grade Advisements are utilized during the semester to notify students regarding performance when achieving less than a score of 75%. Faculty will also utilize the Exemplary Performance form to recognize outstanding performance.
- Students are encouraged to see faculty during established office hours or make an appointment to review questions or concerns.

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

Exam Review

- Once all students have completed the exam, students may view the most recent exam and rationale by making an appointment with the faculty member to review the exam over zoom or in-person.
- Students may not write notes about the exam or have phones out when reviewing the exam.
- Should the student be in violation of the exam review guidelines, the student may be subject to disciplinary action and/or dismissal from the RCP Program.

Grading Scale and Grade Requirements

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

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

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

Withdrawal or Course Failure

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

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

Disciplinary Action/Probation

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

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

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

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

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

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

Program Dismissal

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

- Failure to maintain academic standards as outlined in the Academic Standards Policy
- Failure to meet technical skills and competencies or required performance evaluations

- Failure to uphold the Code of Conduct by displaying any behavior which shows poor judgment, academic dishonesty, endangerment or discredit of individuals, the profession, or the department
- Failure to meet attendance policies
- Failure to maintain physical or mental health in accordance with the essential functions/functional abilities of a Respiratory Care Practitioner as determined by professional consultation

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

Academic Grievances and Appeals

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

East Central College

- [Student Grievance and Appeals Board Policy 3.11](#)

Moberly Area Community College

- [Student Grievance Policy](#), page 22

North Central Missouri College

- [Student Complaint Policy](#)
- [Student Grievance and Grade Appeal Policy](#), page 35

State Fair Community College

- [Grievance Process](#), page 26

Three Rivers College

- [SP 2130 Student Grievance](#)
[SP 2140 Student Appeals](#)

Readmission Policy/Procedure

Eligibility for Readmission:

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

Requirements for Readmission:

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

Process for Readmission:

- Submit a letter to the Chairperson (Program Director) of the RCP Admission and Retention Committee requesting readmission for a specific year or semester.

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

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

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

CLASSROOM, LABORATORY, AND CLINICAL

Emergency Information Record

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

Cell Phones/Electronic Devices

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

At the beginning of the clinical rotation, students should verify with the instructor the cell phone policy for the specific clinical site. *If allowed, cell phones are to be utilized ONLY for retrieval of information related to medications, labs/diagnostics, and pathophysiology. This information must be retrieved under the direction or supervision of the instructor.* The cell phone must remain in silent mode and out of sight of clients and their families. If a disruption occurs due to a cell phone or electronic communication device, the student will be dismissed from the clinical experience, resulting in an unexcused absence. (See "Policies for Clinical Experience" in the Respiratory Care Student Handbook.)

Faculty Communication

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

- The instructor's e-mail will be provided to students at the beginning of the semester and should be the primary means of communication for routine matters, concerns, and questions. Emails sent after 3:00 p.m. may not get a response until the next academic day. There will also be no response to emails during the weekend or college recognized holidays.
- If face-to-face communication is needed, students are encouraged to schedule an appointment during the faculty's regular office hours (posted beside the faculty's office doors & on the Canvas course page).
- Instructor cell phone numbers are provided in the syllabus for emergency use only. **If a call or text to an instructor is necessary, a student should not contact them prior to 6:30 a.m. or after 8:00 p.m.** Examples of appropriate reasons to text or call an instructor include tardiness or illness on the day of clinical or problems logging onto the exam if utilizing remote testing. Texts with non-emergent questions such as clarification of course content, due dates, or paperwork questions may not be answered or will be directed to email.
- *In the event of a clinical absence, students must notify the Director of Clinical Education and the clinical site contact 1 hour before the clinical start time.*

Classroom Attendance and Policies

CLASSROOM ATTENDANCE

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

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

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

- Require that all students communicate via text/voicemail/email with the Instructor/Administrative Assistant if running late. (This will count as a tardy.)
- Mark any student absent if he/she is running late and does not contact the Instructor/Administrative Assistant.

- Request a doctor’s note or a note from hospital staff for any student sickness, child sickness, or immediate family sickness, including immediate medical assistance, that results in missed class, lab, or clinical time.
- Require funeral home documentation for any death in immediate and/or extended family.
- Require physical/photographic proof for any reason causing missed class, lab or clinical time. (Example: Flat Tire – Send picture or receipt for tire; Car Accident – Police report number or photo of vehicle; Stuck in Traffic – Photo of traffic jam; Traffic Ticket or Court Date – Subpoena or copy of ticket, etc.). ***Any absence that does not have physical or photographic proof will be an unexcused absence.***

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

- Medical emergency/hospitalization of the student
- Military duty
- Funeral leave for an immediate family member
- Jury Duty
- Verified Covid-19 Positive Test

CLASSROOM ABSENCE

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

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

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

INCLEMENT WEATHER

The policy of the MHPC is to conduct scheduled classes, keep offices open, and carry out normal college operations under conditions deemed to be reasonably safe. Sometimes adverse weather conditions or other events force the temporary closing or postponement of classes. Students should ensure that current contact

information is always on file with the RCP Program Office. In the event the RCP Program activities are being held, students should not attempt to travel under unsafe conditions or to take unnecessary risk due to inclement weather if they must travel some distance to get to campus. The department administrator and/or course director should be notified if the student is unable to attend class or other activity due to weather. If classes are canceled, a make-up assignment will be posted for the day(s) the college is closed due to inclement weather. It is the responsibility of the student to sign on to Canvas to receive the assignment and/or instructions for each day's classes and to also review the due date. If a student is unable to do the assignment, the student must contact the course instructor to apply for an extension of the due date.

Skills Laboratory Attendance and Policies

SKILLS PRACTICE

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

Practice skills in the lab are mandatory prior to testing and will be done on the student's own time. Practice time and remediation should be tracked by signing in and out of the designated Clinical Lab Logbook. (Students are not required to sign in during a scheduled class time.) ***The secret for passing the skill proficiency tests is practice!*** The entire procedure should be practiced several times from "reading the orders" at the beginning of the procedure to "documentation" at the end. It is the student's responsibility to initiate the use of the lab for his/her independent practice.

Most of the supplies needed for the skills practices are included in the student fees, such as a lab jacket or uniform, clinical identification badge, stethoscope, and a watch with secondhand capability. These supplies should be placed in a supply bag along with scissors, black ink pen, and the appropriate procedure checklists (from course syllabus). The supply bag should accompany a student to every skills practice and will be needed throughout the entire Program. These supplies are NOT available at the Lab should a student fail to bring their supply bag.

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

There are no excused absences from the skills lab experience. If absence occurs, it is the student's responsibility to make arrangements for making up the missed skills lab experience. For Skills Proficiency Testing, the skills validation rubrics are included in the course syllabi and/or in the Canvas course. It is highly recommended that a peer review be completed by a fellow student prior to testing. The proficiency checklist should be signed and dated by the peer reviewer. Students are also expected to have all questions answered regarding the checklist components **PRIOR** to testing.

CRITICAL SAFETY AND PROFESSIONAL BEHAVIOR

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

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

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

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

- Failure to maintain sterility when applicable
- Failure to provide privacy for the patient
- Failure to use gloves appropriately
- Failure to maintain a “clean” patient environment
- Failure to obtain vital signs accurately
- Failure to be in clinical uniform
- Failure to have all necessary equipment
- Failure to bring checkout sheets with peer review signatures to checkouts
- Tardiness to checkout

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

Laboratory Dress Code: During skills proficiency testing and simulations, students must be in full uniform. During practice time, clothing must be in good taste. Students are to dress modestly, which means NO cleavage, backs, bellies, behinds, bra straps, boxers or any underwear are allowed to be exposed in the lab. ***Students in violation will be asked to leave the lab and return when dressed appropriately.*** (When in doubt, a student should wear something else). A lab coat or scrubs with a name badge is required when in the lab. The badge must be worn at eye level to clients. Faculty have the right to refuse lab access if a student is not dressed properly for testing and/or lab practice.

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

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

- Treat the manikin and its belongings with the same respect you would a live patient.
- Keep the manikin dry, using care when the simulation involves fluid (i.e. blood, urine, etc.). In addition, do not spill fluids over any component inside the torso of the simulator manikin since this could damage the unit and might present a possible hazard for the operator.
- Ensure the flow of air/suction to all equipment, control boxes, etc. are turned off completely when finished with a manikin.
- Use all equipment with care and report any damage/malfunction of manikins or other clinical lab equipment immediately to a faculty member or department administrative assistant.
- Report **any LATEX ALLERGY**, or other allergens that a student may be exposed to in the clinical lab setting, to a faculty member prior to entering the clinical lab.
- Place **ONLY** “sharp” items such as needles/syringes/glass in the sharps’ containers. NO PAPER or ALCOHOL wipes.
- Report immediately to the instructor if a splash or needle stick occurs so that an incident report can be completed.
- Dispose of any trash in appropriate containers.
- Return clinical lab supplies to the appropriate storage areas when completed.
- Sanitize your workspace including the manikins, bed frames, tables, and simulation pads after each use.
- Support the manikin head when moving or turning the simulator manikin.
- Use cell phones, smart watches and other electronic devices in **silent mode only or turn them completely off** during lab experiences. (Students may check messages on class breaks.)

Student Expectations – Items a student SHOULD NOT do:

- Practice any invasive procedures on anyone at any time!
- Interrupt an instructor when working with a student during practice or during an actual skills proficiency exam.
- Use point/felt tip pens near the manikins due to potential permanent discoloration of manikin “skin”.
- Place photocopied papers on, under, or near the manikins to prevent the risk of ink transfer.
- Place iodine or other staining medications into contact with the manikins.
- Place artificial blood or other materials on the manikin’s skin without first verifying with the faculty/lab staff that the materials will not damage the manikins.

- Lift the manikin by the arms. (Always use a lift sheet to move or turn the simulator manikin.)
- Manipulate, or remove any cords or connections from any of the equipment or the simulator manikin unless instructed to do so by the instructor (i.e. IV lines, etc.).
- Introduce any fluids except airway lubricant in small amounts into the manikin’s esophagus or trachea. (Airway lubricant is provided in canisters specifically labeled for airway use.)
- Use anything other than the supplied, labeled lubrication spray/liquid to lubricate equipment.
- Inject anything other than sterile water into the simulator. (All prepared medications are in sterile water.)
- Remove any supplies or equipment from the clinical lab.
- Take photographs, audio, or video recordings while in the clinical lab unless it is approved for learning purposes. (Students and other users are required to complete a photo and video release statement if their simulation experience requires recording by faculty/lab staff.)

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

LABORATORY REMEDIATION

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

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

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

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

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

Clinical Overview

CLINICAL EXPERIENCE

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

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

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

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

CLINICAL EDUCATION EVALUATION OVERVIEW

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

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

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

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

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

Methods of Evaluation:

- Didactic Classroom Competencies
 - RCP Competency Evaluation Form
- Clinical Education Checklists
 - Preceptor Clinical Evaluation Form
- Patient Case Study
- Mid-Term Evaluation
- Final Evaluation
- Clinical Education Competency Evaluation

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

A student who does not successfully complete or pass the skill will be required to continue supervised practice and will be allowed a second attempt. If the student fails a second time, they will be required to remediate in the classroom/lab. All required mandatory competencies, as stated in the clinical checklist for each course, must be successfully completed. Students will not be required to perform any procedures that exceed their educational or clinical experience. A student may be asked to transport patients or to perform other tasks that are pertinent to respiratory care of patients or for the operation of the department and will do so willingly and without hesitation.

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

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

MALPRACTICE & PROFESSIONAL LIABILITY INSURANCE

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

SITE AFFILIATES AND CONTACTS

Each MHPC partner college has its own clinical affiliation(s). Below is a list of the sites that are utilized by each partner college.

East Central College

- Missouri Baptist Sullivan Hospital
 - Dustin Duncan, RT, RPSCT, Assistant Manager Respiratory Care, dustin.duncan@bjc.org
- Mercy Hospital Washington
 - Amber Pataky, MHA, BSRT, NPS, Manager Respiratory Care Services
- Phelps Health
 - Cheryl Hoerr, MBA, RRT, Manager Respiratory Care Services

Moberly Area Community College

- Hannibal Regional Hospital
 - Suzanne Dewey, Manager Respiratory Care
- Boone Health
 - Lori Hubbard, RT Manager

North Central Missouri College

- Mosaic Life Care
 - Patricia Hawkins, Director of Respiratory
 - Sandra (Danielle) Steele, Associate Director

State Fair Community College

- Bothwell Regional Health Center,
 - Jenny Force, RT Director
- Golden Valley Memorial Health Care Center
 - Ken Marek, Director of Respiratory Care

Three Rivers College

- Poplar Bluff Regional Medical Center
 - Tiffany Rodery, Director of Respiratory
- Missouri Delta
 - Heather Nanney, RT Director

SITE AVAILABILITY

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

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

CLINICAL SUPERVISION AND AUTHORITY

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

The Clinical Preceptor is an employee of the hospital who satisfies the job description of that position and who is responsible for coordinating and evaluating the daily performance of the student while in the clinical

setting. Any concern regarding a clinical preceptor should be presented to the Director of Clinical Education and will be handled by the management of the affiliate and the college.

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

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

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

CLINICAL ISSUES/PROBLEMS

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

CLINICAL INCIDENT/ACCIDENT REPORT

In the event of an incident/accident involving a student during clinicals, it is the responsibility of the student to report the incident/accident to the instructor/preceptor, as soon as possible, during the clinical period. In the event a student is involved in an incident/accident, the student is financially responsible for any necessary medical care for the student and any clients involved.

Clinical Expectations and Policies

PROFESSIONALISM IN THE CLINICAL SETTING

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

- Timeliness and attendance
- Positive communication with all staff and patients
- Adherence to MHPC RCP guidelines and facility dress codes
- Active involvement during patient interactions, observations, professional meetings, etc.

- Response to all requests in a positive manner
- Pursuit of learning opportunities, specifically if “down time” presents itself
- Absence of texts, e-mails, phone calls, or other personal communication while on-site
- Ethical behavior in all matters

PATIENT CONFIDENTIALITY AND THE HIPAA SECURITY RULE

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

Definitions regarding a patient's health records:

- **Privacy** -- the clinical site's desire to limit the disclosure of the client's personal information
- **Confidentiality** -- a condition in which information is shared or released in a controlled manner
- **Security** -- measures to protect confidentiality, integrity and availability of information and the information systems used to access it
- **Electronic Health Record** (electronic medical records/information) -- a computerized format of healthcare information that is used for the same range of purposes as paper records, namely to familiarize readers with the client, to document care, to document the need for care, to assess the quality of care, to determine reimbursement rates, to justify reimbursement claims and to measure outcomes of the care process

All students are fully responsible for following all regulations of the Health Insurance Portability and Accountability Act (HIPAA) guidelines. The HIPAA Security Rule establishes national standards to protect an individual's electronic personal health information that is created, received, used, or maintained by a covered entity. The Security Rule requires appropriate administrative, physical and technical safeguards to ensure the confidentiality, integrity, and security of electronic protected health information. The Security Rule is located at 45 CFR [Part 160](#) and Subparts A and C of [Part 164](#). The security rule adopts standards for the security of electronic protected health information to be implemented by health plans, health care clearinghouses, and certain health care providers.

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

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

- ***The client's EHR is a legal document and may not be photocopied or printed for any reason, according to facility policy. Photocopying of a medical record is a HIPAA violation and will result in disciplinary action.***
- Research of a medical record is for the purpose of the RCP Program curriculum and course requirements only. ***Personal Health Identifiers (PHI) must be removed from any client data collected by the student.***
- Students will use passwords to protect access to information. These passwords are never to be disclosed to another individual.
- ***Students do not have authorization to review medical documents of clients not assigned to them unless review is authorized by the instructor. Students also do not have authorization to review electronic health records of any personal acquaintances such as a family member or friend, under any circumstance.***
- Electronic Medical Records may only be accessed while present at the clinical site AND only during approved clinical rotations. Students will follow clinical site protocols for review of medical records. ***Accessing an Electronic Medical Record while off-site is considered a HIPAA violation and will result in disciplinary action.***
- Handheld electronic devices (I-pads, smartphones, etc.) may be used to obtain educational information such as the use of an electronic drug book. ***The device must be kept silent and cannot be used for personal use at a clinical site.*** It is at the instructor's discretion to disallow electronic devices during the clinical experience.
- ***Using the internet for personal, non-school related functions while at a clinical site is strictly prohibited.*** Inappropriate internet access/usage or violation of HIPAA guidelines is cause for termination from MHPC RCP Program. (See MHPC RCP Program Disciplinary Guidelines.)
- Students will annually sign the MHPC RCP Electronic Compliance Form (Authorization to Access/Use PHI) prior to entering any clinical setting. This form will be placed in each student's file.

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

USE OF SOCIAL MEDIA

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

Students are expected to comply with all state, local, and federal requirements governing the privacy of medical information, even when they are not at the clinical site. This includes conversations with family, friends, and peers. Students will be held accountable for maintaining the privacy of any information they obtain, see, or are given during their clinical rotations. To uphold the privacy of such information, students

must not post or discuss any clinical experience. Any information regarding the student's experience with the clinical site, its staff, or its clients/patients cannot be posted on any internet social media (Facebook, Twitter, emails, Myspace, Snapchat, Instagram, and any other platform not mentioned). The use of social media outlets (i.e. Facebook, Twitter, Instagram, Text messaging, etc.) is strictly prohibited in all capacities related to the MHPC RCP Program experience. ***The posting of pictures, comments or discussions addressing any classroom and/or clinical experience on any of these sites could result in immediate dismissal from the Program.***

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

CLINICAL POLICIES

- **Student Clinical File:** The student's clinical file must be complete prior to the first day of clinical. This includes proof of current PPD (2-step), CPR, etc. Students with incomplete files will not be able to attend clinical and will receive a clinical absence make-up assignment for each day of clinical missed.
- **Client Confidentiality:** Confidentiality is to be upheld at all times. Conversations concerning clients between students and/or others (either in the institution or elsewhere) should be only those which are professional and necessary. The client's chart is a legal document and ***may not be photocopied or printed for any reason.*** ***Students do not have authorization to review medical documents of clients not assigned to them unless review is authorized by the instructor.***
- **Punctuality:** If tardiness is anticipated, students must notify the instructor at the institution at least 15 minutes prior to the scheduled time of work. Students who are tardy may not be allowed in the clinical area and may be considered absent for the day. ***Failure to notify the instructor of absence or tardiness may be considered as cause for dismissal.***
- **Professionalism:** A student will be asked to leave the clinical setting (considered an absence) by the instructor for unsafe and/or unprofessional behavior. Possible examples include, but are not limited to the following:
 - lack of or incomplete preparation
 - illness
 - appearance not in compliance with dress code
 - inability to meet client's needs
 - under the influence of drugs and/or alcohol
 - uses of tobacco while in uniform or any odor of tobacco
 - cell phone/smart watch disruption
 - violation of the Code of Professional Conduct and Student Civility Policy
- **Clinical Late Assignment Plan for Success:** Failure to submit written work on time will result in the student receiving a Clinical Late Assignment Plan for Success. The student must meet with their clinical instructor to develop a plan for success after one late clinical assignment. Each additional assignment that is submitted late or completely omitted will result in a Clinical Learning Plan for Success. Students may not accumulate more than two Clinical Late Assignment Plans for Success in a

16-week semester and one in an 8-week semester. To accrue more than this limit results in review of the students' clinical performance by the faculty. Directives to the student from the faculty may include probation and/or dismissal from the Program. Any student placed on probation due to clinical performance shall receive at least one letter grade lower than that earned. (For example, if a student has a letter grade of "C", probation status would result in a letter grade of "D" being issued.)

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

ADDITIONAL CLINICAL EXPECTATIONS

- The student may not leave the assigned clinical unit unless he/she has permission from the instructor/preceptor (i.e. parking lot, car, etc.).
- Clients should be referred to by name only, never by room number or diagnosis.
- Students should do procedures ***only*** under the supervision of the instructor or MHPC student preceptor.
- Students are never permitted to witness any legal documents.
- Students are expected to make good use of clinical time working with clients and assisting other team members, if time permits.
- Students should assume responsibility for the proper use and care of equipment. If a student damages any article, he/she must report the damage to the instructor/preceptor. No equipment is to be taken out of the facility.
- Students that have been asked to permanently leave a facility or are deemed ineligible for clinical work at that facility, and cannot meet objectives at another approved site, may be dismissed from the Program.
- Students will communicate with peers, members of the health team, and clients in a quiet, professional manner.
- Students will conduct themselves in a professional manner in the clinical areas.
- Students must follow clinical site policies as well as MHPC RCP Program policies. Failure to follow these policies violates the Code of Conduct and Civility policy and can result in probation or dismissal from the Program.

CLINICAL ATTENDANCE

- Clinical experience is vital for learning and professional development; therefore, *there will be no excused clinical absence*. Make-up of clinical days missed due to weather will be determined by the Program faculty and Director. Specific recommendations will be made for additional experience at the discretion of the Program faculty.
- A student *may not accumulate more than 2 clinical absences within a 16-week semester or 1 in an 8-week semester*. Accruing clinical absences may affect the clinical grade negatively or be grounds for probation or Program dismissal.
- If clinical absence is unavoidable, it is the student's responsibility to *speak to the instructor one hour prior to the scheduled clinical day*. Student-Instructor contact **MUST** be made before clinical begins. A written clinical make-up Plan for Success will be developed between the student and the appropriate clinical instructor for the missed experience. *The Clinical Absence Plan for Success must be initiated within 24 hours of initial notification of absence, and it is the student's responsibility to initiate this plan*. The specific terms of this contract will be set forth by the clinical instructor and shall include a deadline for the completion of terms. (Possible examples include, but are not limited to, presentation of a formal post-conference, development of a written research paper, attendance of clinical make-up, attendance of clinical make-up experience that may include a special clinical fee at the student's expense.) Failure to satisfactorily initiate and/or complete the terms of the contract as specified, including the deadline, will be grounds for re-evaluation of contract and may be grounds for dismissal from the Program.

CLINICAL ABSENCE

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

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

CLINICAL REMEDIATION

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

During remediation, the following steps will take place:

- The concern or problem will be identified.
- A review will be done of the student's clinical and academic history to identify a pattern of concerns.
- Identification of strategies to address concerns will be formulated by the student, faculty and clinical site representative.
- A Remediation Plan for Success will be written outlining who will be responsible for the action steps. This will include measurable student objectives developed by the student under the guidance of the DCE, Educator, and/or Program Director.
- Faculty, along with student and clinical site input, will decide how to or whether to continue with the present clinical experience.
- Ongoing communication with both the student and the clinical site will occur throughout the remaining clinical rotation by the DCE to ensure that the student maintains the clinical site's performance expectations.
- Necessity of an onsite visit by the DCE will be determined in conjunction with the student. The DCE reserves the right to schedule an unannounced visit to review the students' performance.



Respiratory Care Practitioner Program Exemplary Performance Form

Student Name: _____ Date: _____

Faculty: _____ Course: _____

Area of Commendation:

Clinical Course Professional Activity

Details of Exemplary Performance:

Congratulations on your excellent performance!

Faculty Signature: _____ Date: _____



Respiratory Care Practitioner Program Grade Advisement Form

Student Name: _____ Date: _____

Faculty: _____ Course: _____

Most Recent Exam Score: You have received _____ points from a total of _____.

Current Course Score: You have received _____ points from a total of _____.

To be successful in this course and progress through the RCP Program, you will need to obtain a score of at least 77%. Your score reflects that you need additional assistance or changes to your academic preparedness. Please make an appointment to meet with your instructor(s) to discuss your grade advisement. Complete **Section 1** below and bring this document with you to the appointment. Suggested actions for improvement will be discussed during your grade advisement meeting.

Section 1 – To be completed by the student:

Select the appropriate reason(s) as to what *you believe* is the cause of your current grade.

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

Section 2 – To be completed by faculty:

Recommendations for study practices and resource utilization:

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

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

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

Recommended Remediation Plan:

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

Student Signature: _____ Advisement Date: _____

Faculty Signature: _____

Grade Advisement Form - Reflective Exam Review

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

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

Study Options

Check the study options below that you are currently utilizing.

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



Respiratory Care Practitioner Program

Plan for Success: Clinical Late Assignment

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

Student Name: _____ Date: _____

Late Assignment: _____

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

Faculty Signature: _____ Date: _____

Student Signature: _____ Date: _____

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



Respiratory Care Practitioner Program

Plan for Success: Clinical Learning Performance

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

Student Name: _____ Date: _____

Reason for Success Plan: _____

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

Signature of Designated Clinical Instructor: _____ Date: _____

Student Signature: _____ Date: _____

Signature of Instructor Documenting Successful Completion: _____

Date of Instructor Review: _____

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



Respiratory Care Practitioner Program Clinical/Lab Remediation Plan

Student Name: _____ Date: _____

Instructor: _____

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

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

Amount of Mandatory Practice Time Needed in the Lab: _____

Student Signature: _____ Date: _____

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

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



Respiratory Care Practitioner Program Probation Notification

Student Name: _____ Date: _____

This student acknowledges the following items:

- The student has been notified of official placement on probation status in the RCP Program. This action was taken in response to the student accumulating one of the following:
 - _____ More than 2 Plans for Success in a 16-week semester. Course: _____
 - _____ More than 2 make-up assignments in a 16-week semester. Course: _____
 - _____ Excessive Theory Absences
 - _____ More than 2 Clinical Absence Plans for Success in a 16-week semester.
 - _____ More than 2 Clinical Learning Plans for Success in a 16-week semester.
 - _____ Other: _____
- The student has had the probation policy explained and understands the same.
- The student has been referred to the written policy in the Student Handbook and has read the same.
- The student understands that any student placed on probation shall receive at least one (1) letter grade lower than the grade earned by the student for the semester and the course with a probation status.

Student Signature: _____ Date: _____

Instructor Signature: _____ Date: _____

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

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

STUDENT CONDUCT

Professional Conduct & Student Civility

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

Students are expected to maintain the following standards of conduct:

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

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

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

- Demonstrate behavior that reflects integrity, supports objectivity, and fosters trust in the profession and its professionals.
- Promote and practice evidence-based medicine.
- Seek continuing education opportunities to improve and maintain their professional competence and document their participation accurately.
- Perform only those procedures or functions in which they are individually competent, and which are within their scope of accepted and responsible practice.
- Respect and protect the legal and personal rights of patients, including the right to privacy, informed consent, and refusal of treatment.
- Divulge no protected information regarding any patient or family unless disclosure is required for the responsible performance of duty as authorized by the patient and/or family or required by law.
- Provide care without discrimination on any basis, with respect for the rights and dignity of all individuals.
- Promote disease prevention and wellness.

- Refuse to participate in illegal or unethical acts.
- Refuse to conceal, and will report, the illegal, unethical, fraudulent, or incompetent acts of others.
- Follow sound scientific procedures and ethical principles in research.
- Comply with state or federal laws which govern and relate to their practice.
- Avoid any form of conduct that is fraudulent or creates a conflict of interest and shall follow the principles of ethical business behavior.
- Promote health care delivery through improvement of access, efficacy, and cost of patient care.
- Encourage and promote appropriate stewardship of resources. *
(*AARC.org <https://www.aarc.org/wp-content/uploads/2017/03/statement-of-ethics.pdf> Revised: 10/21)

The AARC Statement of Ethics and Professional Conduct also states Respiratory therapists shall, “Work to achieve and maintain respectful, functional, beneficial, relationships, and communication with all health professionals. Disregard for the effects of one’s actions on others, bullying, harassment, intimidation, manipulation, threats, or violence are always unacceptable behaviors. It is the position of the American Association for Respiratory Care that there is no place in a professional practice environment for lateral violence and bullying among respiratory therapists or between healthcare professionals.”

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

- Failing to meet set deadlines (application, vaccinations, etc.)
- Failing to notify faculty/staff of tardiness or inability to attend a scheduled appointment
- Discounting or ignoring solicited input from faculty regarding classroom, clinical performance, or professional conduct
- Knowingly withholding information from faculty, peers, & clinical staff
- Not responding to email, letters, or voicemail that require a reply
- Sending emails or text messages that are inflammatory/disrespectful in nature
- Demeaning, belittling or harassing others
- Rumoring, gossiping, or damaging the reputation of a classmate, instructor, or clinical staff member
- Speaking with a condescending attitude
- Yelling or screaming at faculty, peers, clinical staff, or clients & their families
- Display of temper or rudeness that may or may not escalate into threatened or actual violence

- Threatening others (This refers to physical threats, verbal/nonverbal threats, and implied threats.)
- Inappropriate posting on social media related to the MHPC RCP Program experience (Refer to the policy regarding Use of Social Media.)
- Illegally removing college property, healthcare agency, or client property from the premises
- Destruction of any college, healthcare or client property
- Falsifying or fabricating clinical experiences
- Documenting respiratory care that was not performed or falsifying a client record
- Knowingly accessing a client's health record that is not in your direct care
- Failure to follow RCP Program and/or clinical site policies

MHPC Partner Colleges' Student Code of Conduct

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

East Central College

- [3.20 Student Conduct](#)

Moberly Area Community College

- [Student Code of Conduct](#), page 17

North Central Missouri College

- [Student Conduct](#), page 49

State Fair Community College

- [Student Code of Conduct](#), page 63

Three Rivers College

- [SP 2610 Student Code of Conduct](#)

Academic Honesty and Honor Code

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

- Claiming authorship/participation in a group paper or presentation without real contribution

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

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

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

East Central College

- [Academic Honor Code](#), pages 4-6

Moberly Area Community College

- [Academic Honor Code](#), page 18

North Central Missouri College

- [Academic Dishonesty](#), page 33

State Fair Community College

- [Academic Honor Code](#), page 63

Three Rivers College

- [SR 2610 Student Code of Conduct](#)

Use of Artificial Intelligence (AI) for Classroom Work

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

Code of Conduct Non-Compliance

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

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

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

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

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

RCP Program Professional Appearance/Dress Code

- While in clinical class, students must wear hunter green scrubs with solid matching socks that are white, neutral, or subdued. A white long or short sleeve, crewneck t-shirt can be worn under the scrub top. Proper undergarments must also be worn.
- While in non-clinical class, students may wear business casual attire. ***Midriff, lower back, and breast cleavage may NOT be exposed during any activity.***
- A MHPC RCP Student ID must be worn at all times. (If a student is employed at any facility, the student may not wear the MHPC student ID while at work.)
- ***Shoes must be professional, clean, non-canvas, closed-toed, and water resistant.***
- A watch, with a second hand, must be worn at all times.
- Personal hygiene must be maintained. Prior to attending ***ALL*** clinical experiences, students are expected to bathe, apply deodorant, and brush their teeth.
- Hair should be neat, clean, and worn appropriately. Extreme hair styles and/or non-natural/fad colors, including sprayed coloring, are not appropriate. For infection control purposes, hair should not hang over or come into contact with clients or equipment. (Students with hair length below the neck should tie their hair back securely and off the face. In certain areas/departments, additional measures like hair covering or hair nets may be required.)
- Facial hair must be neatly trimmed and groomed.
- Fingernails must be kept short and clean. Only clear polish with short natural tips is allowed. (***No artificial nails or nail tips.***)
- Hand jewelry is limited to one ring only and earrings must be small and in good taste. (Only stud posts in a non-dangling style are allowed with no more than two earrings per ear.) Body piercings must not be visible and must be covered tastefully. Facial piercings and tongue piercings are not allowed. “Gauge holes” must be filled with a clear or flesh-colored plug.
- Tattoos on the head, face, neck, and scalp must be covered. MHPC faculty and staff reserve the right to assess the appearance of visible tattoos to determine if they are appropriate to be visible. Tattoos based on racial, sexual, religious, ethnic, or other characteristics of a sensitive or legally protected nature must be non-offensive.
- Make-up may be worn but must be in good taste.
- Perfume /cologne is not allowed.
- ***Smoking or drinking alcoholic beverages in uniform is not allowed and students should be free from the odor of smoke or other offensive odors.***
- Personal cell phones and other means of electronic personal communication are NOT to be carried in the clinical setting, unless approved by the clinical facility and the clinical instructor.

HEALTH AND SAFETY GUIDELINES

Occupational Risks/Communicable Diseases

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

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

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

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

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

Exposure/Event Reporting

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

- Step 1: Report the incident immediately after the exposure occurs to the appropriate person at the healthcare facility.
- Step 2: Report the incident immediately to the faculty member in charge of the clinical rotation.
- Step 3: Report the incident to the department of infection control and complete the appropriate exposure form.

Health Maintenance and Extended Medical Leave

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

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

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

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

Use of Human Subjects for Training Purposes

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

Latex and Other Allergens

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

Clinical Vaccination Requirement

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

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

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

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

Immunization Guidelines

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

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

- **RUBELLA**
 - Note signed by the physician stating that the individual has had the disease and that the diagnosis was supported by serial (2) serological tests at the time of the disease (Date of disease must be included.)
 - Proof of immunity by serological (blood test) screening which reads “reactive” (Date of the screening must be included.)
 - Immunization record including dates of the last two (2) vaccinations

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

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

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

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

- **COVID-19**
 - Clinical sites may require the Covid vaccine. ***If required, proof of vaccination must be given each year by the date specified at the clinical site.*** It is the student’s responsibility to maintain compliance with clinical site requirements.

Tuberculosis Testing

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

Proof of testing must include the testing method, the date(s) of the test, the test result, and the signature of the physician or nurse administering the test. This information must be submitted either on official stationery from the healthcare provider, or on the physical examination form that is required for entrance into the RCP Program.

Students who have had previous treatment for tuberculosis are required to submit the result of a recent (within the last 2 years) chest radiograph to exclude tuberculosis disease. This requirement will also apply to any student who has received a baseline or newly positive test result for *m. tuberculosis infection*. Rather than participate in annual serial testing, these students will instead be required to complete an annual symptom screen assessment.

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



Respiratory Care Practitioner Program Tuberculosis Symptom Questionnaire

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

Student Name: _____ Return Date: _____

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

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

Please checkmark any symptoms you are experiencing:

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

Student Signature: _____ Date: _____

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



Respiratory Care Practitioner Program Health and Wellness Survival Guide



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

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

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

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

Teamwork makes the dream work! Doctors, Nurses, and Respiratory Care Practitioners are all on the same team caring for the patient. ***Get to know those relationships and how to navigate them!*** This is important to long-term success.

Find ways to have fun!



Respiratory Care Practitioner Program Handbook Policy/Clinical Lab Acknowledgement

I, the undersigned, have received, read and fully understand the policies in the Student Handbook for the Respiratory Care Practitioner Program, which was reviewed in November 2024.

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

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

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

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

Student Name (Print): _____

Signature: _____ Date: _____

Notice of Non-Discrimination

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



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

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

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

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

Section 2: Student User Agreement

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

Student Name (Printed): _____

Student Signature: _____ Date: _____



Respiratory Care Practitioner Program Media Consent Form

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

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

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

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

Student Name (Print): _____ Phone: _____

Address: _____
Street Address City State Zip code

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



Respiratory Care Practitioner Program Records Release/Consent to Release Information

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

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

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

Release Information to: _____

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

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

Student Signature: _____ Date: _____

Witnessed by: _____ Date: _____

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



Respiratory Care Practitioner Program Criminal Background Policy/Consent

Criminal Background Policy

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

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

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

Criminal Background Consent

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

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

Full Name (Print): _____ SS#: _____

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

Date of Birth: _____ Place of Birth: _____

Address: _____
Street Address City State Zip code

Signature: _____ Date: _____

Witness Signature: _____ Date: _____



Respiratory Care Practitioner Program Substance Abuse Policy/Consent

Substance Abuse/Drug and Alcohol Policy

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

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

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

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

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



Respiratory Care Practitioner Program Medical Marijuana Policy

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

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

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

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

Full Name (Print): _____

Signature: _____ Date: _____