

Daytona State College  
Emergency Medical Service Programs

Student Handbook  
Emergency Medical Technician and Paramedic



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The Daytona State College EMS (Emergency Medical Services) Program is approved by the Florida Department of Health-Bureau of Emergency Medical Services, as meeting all requirements of Florida Statute Section 401 and Florida Administrative Code 64-J-1 for EMS Training Centers in Florida.

The Daytona State College Paramedic Program is accredited by the Commission on Accreditation of Allied Health Education Programs (CAAHEP) upon the recommendation of the Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions (CoAEMSP).

Daytona State College is accredited by the Southern Association of Colleges and Schools Commission on Colleges to award Associate and Bachelor's degrees. Contact the Commission on Colleges at 1866 Southern Lane, Decatur, Georgia 30033-4097 or call 404-679-4500 for questions about the accreditation of Daytona State College.

Daytona State College Emergency Services Assistant Chair Approval 11/15/2023

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*Daytona State College EMS Student Handbook*

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## **SECTION 1- GENERAL INFORMATION**

### **EMS Department Administration/General Information**

#### **1.1 Office Hours**

The EMS Department office, located at the Advanced Technology College (ATC) campus, is open Monday through Friday from 8 a.m. – 5 p.m. (unless otherwise posted).

#### **1.2 Student Use of DSC Property/Equipment**

##### **Employee Computers, Copy Machine, Department Phones**

Students may not use employee computers. Student computer access is available in the computer commons normal operating hours. Students may not make copies on the EMS department copy machine. Students may not use department telephones except in emergencies and with prior staff approval.

#### **1.3 EMS Department Closing Notification**

Occasionally, the EMS Department may close due to inclement weather, or to major public safety events that impact our ability to utilize adjunct instructors. Students will be notified of any changes in the class schedule through their Daytona State College email, course announcements, Daytona State College EMS Facebook page, DSC Alert system, and/or by contacting the EMS department.

#### **1.4 Change in Contact Information**

The EMS office must be notified immediately in writing of any change of name, address, or phone number. Each student must also notify student records/registration and update FISDAP account contact information. Each student must use their college email address for communication, as this provides a layer of confidentiality and protection.

#### **1.5 Change in Approval/Access Status – Background/Illegal Substances/Medical**

Students accepted into the limited access EMT (Emergency Medical Technician), or Paramedic program have passed a level 2 background screening and tests for illegal substances and other medical compliance. Students involved in any activity OR event that could change these evaluations must notify the EMS Program within 24 hours.

Students must immediately notify their Lead Instructor if they become injured, ill, or have a change in medical status.

The EMS program may require a physician to examine and recommend continued attendance in any EMS program for any change in medical status. Students being seen by a physician will be required to submit a completed Medical Clearance Form to the Assistant Chair, on the “**DSC EMT/Paramedic Physicians Medical Release Form**” (APPENDIX A) before they can be considered to re-enter the program and resume activities. This includes agency-sponsored students placed on no duty, light duty, and/or worker’s compensation. Continuation of lectures, labs, or clinicals, without notification could jeopardize the student’s participation in the program. If the medical restriction interferes with the student completing the program within the given semester, it is the student’s responsibility to properly withdraw from all co-requisites, and/or file a student appeal.

#### **1.6 College Application for Graduation**

The College requires that all students complete an “Application for Graduation” prior to the end of the semester that he/she graduates. The EMS Senior Staff Assistant will provide the forms, instructions, and a deadline to comply for each EMS class.

Once the application for graduation has been completed and all course work has been satisfactorily completed, DSC will issue a Certificate of Graduation in recognition of students’ achievement. The College issued Certificate of Graduation is not to be submitted to the Florida Department of Health/Bureau of EMS with your application for certification.

### **1.7 EMS Certification of Completion**

Students who have met all academic requirements and completed the required Application for Graduation will be provided with a certificate of completion within 14 days of their course completion date as directed by Florida Statute.

The EMS department issues the only authorized certificate of completion accepted by the Florida Department of Health/Bureau of EMS. The EMS Department issued certificate will contain our site code, the number of hours completed and the signatures of our Medical Director and Assistant Chair.

### **1.8 Student Attendance Continuity Requirement**

Returning students who have been away from the paramedic program for more than 365 days will be required return starting with Paramedic I. No prior training will be recognized even if the student has received a passing grade for the prior semesters of training. Transfer students will only be accepted from programs accredited at their time of attendance and can demonstrate the same or more program hours of participation that occurred within the prior 365 days of the start of the needed cohort. Paramedic/EMT students not meeting clinical entry criteria by the assigned deadline will not be allowed to register for the required clinical course and may be removed from the program.

## SECTION 2- PROGRAM OVERSIGHT

**Standards and guidelines for the Accreditation of Educational Programs in the Emergency Medical Services Professions (2015).**

### 2.1 Program Medical Director

- The program Medical Director is responsible for medical oversight of the program and must:
- Review and approve the educational content of the program curriculum for appropriateness, medical accuracy, and reflection of current evidence-informed pre-hospital or emergency care practice.
- Review and approve the required minimum numbers for each patient contact and procedures listed in these Standards.
- Review and approve the instruments and processes used to evaluate students in didactic, laboratory, clinical and field internship.
- Review the progress of each student throughout the program and help determine appropriate corrective measures, when needed.
- Ensure the competence of each graduate of the program in the cognitive, psychomotor, and affective domains.
- Engage in cooperative involvement with the Assistant Chair.
- Ensure the effectiveness and quality of any Medical Director responsibilities delegated to another qualified physician.
- Ensure educational interaction of physicians with students. The Medical Director interaction should be in various settings, such as lecture, laboratory, clinical, field internship. Interaction may be by synchronous electronic methods.

### 2.2 Assistant Chair

**Responsibilities:** The Assistant Chair must be responsible for all aspects of the program including, but not limited to:

- The administration, organization, and supervision of the educational program.
- The continuous quality review and improvement of the educational program.
- Long range planning and ongoing development of the program.
- The effectiveness of the program, including instruction and faculty, with systems in place to demonstrate the effectiveness of the program.
- Cooperative involvement with the Medical Director.
- The orientation/training and supervision of clinical and field internship preceptors.
- The effectiveness and quality of fulfillment of responsibilities delegated to another qualified individual.

### 2.3 Lead Instructor/Lab Faculty/Clinical and Field Preceptors

**Lead Instructor Responsibilities:** Perform duties assigned under the direction and delegation of the Assistant Chair. Lead Instructors/Faculty are responsible for configuring the daily lecture and lab activities, scheduling the lab rotations, administering quizzes, exams, assigning/oversight of adjunct faculty, writing scenarios for final skills, and grading for all students within their course.

**Lab Faculty Responsibilities:** Teach assigned topics and conduct student evaluations as directed by the lead instructor.

**Clinical Preceptor:** Hospital preceptors provide supervision and frequent assessment of the students' progress in achieving program requirements. These preceptors are assigned to a small group of students.

**Field Preceptor:** Fire or ambulance employee designated to supervise and evaluate student progress during their field experiences.

**Internship Experience (Paramedic):** Activities occurring in the last semester of the educational process to allow students to develop and practice high-level decision making by integrating and applying paramedic knowledge learned in the previous semesters by a demonstration of the mastery of related competencies; Paramedics - SMC (Student Minimum Competency).

#### **2.4 Director of the Charles M. Curb School of Emergency Services**

The Director of the Charles M. Curb School of Emergency Services oversees training the law enforcement, corrections, fire, and EMS professions. In addition to initial certification training programs, the Director provides oversight for advanced training and college degree programs to enhance the student's career.

## SECTION 3 - UNIFORM REQUIREMENTS

### 3.1 Uniform

The designated student uniform shall be worn entirely with no additions or deletions during all lecture, lab and clinical sessions unless authorized by the EMS Assistant Chair.

### 3.2 College Picture ID

A College issued student picture ID must be worn by all students during clinical sessions. Many of our clinical (hospital) facilities require the use of badges, which will be issued by the clinical site, and shall be worn in accordance with the clinical site's policies.

### 3.3 Program Uniforms

*Students may only wear jackets/uniform pieces approved as an official attire of the DSC/EMS program and purchased from an approved vendor.* All students must be clearly identifiable as a student intern within the DSC/EMS program whenever they are in uniform while fulfilling the requirements of this program. Uniforms are required for lectures, labs, and clinical/internship rotations. Students should wear the uniform properly and with respect whenever the uniform is required. The uniform must only be worn in its entirety. The uniform vendor will assure proper reflective lettering in on the back of all shirts/outerwear with the Charles M. Curb School of Emergency Services Logo (patch for the jacket, embroidered for the shirts) affixed to the front. The student's name will be embroidered on the front of all uniform shirts.

#### Uniform Inspections

Students are reminded that the uniform should be worn appropriately as listed above. Should a student's appearance be deemed unacceptable, the student will be asked to comply. Any personal issues that would result in your not complying shall be discussed with the Lead Instructor. Violations will be recorded on Event Forms and violators may be suspended or dismissed from the program.

#### Uniforms in Drinking Establishments

Students are prohibited from wearing their uniforms to any establishment whose primary purpose is to serve alcoholic beverages unless in response to an emergency or non-emergency call on an approved DSC clinical rotation.

#### Pants - EMT and Paramedic

Pants can be long BDU style or dress pants, black. Sponsored students may wear uniform pants issued by their organization with prior approval of the Assistant Chair.

#### EMT Uniform Shirt

EMT students must wear a khaki/tan uniform shirt with the School of Emergency Services logo. Program uniform shirts must always be tucked in.

#### Paramedic Uniform Shirt

Paramedic students shall wear a maroon uniform shirt with the School of Emergency Services logo. Program uniform shirts must always be tucked in.

#### Undershirts

A white or black crew neck short or long-sleeved t-shirt must be worn under the student uniform



shirt. The undershirt must be free of any graphics and/or lettering which may show through the uniform shirt.

### **Belt**

Professional in appearance, a black web or plain belt, with a plain belt buckle must be always worn with the uniform.

### **Shoes**

Plain toed black polishable boots must be worn when in uniform. Black sneakers, slides, or cowboy boots are not permitted.

### **Hats**

Hats are not permitted to be worn while the student is in uniform.

### **Jewelry**

To promote a professional appearance and a safe environment, the following are authorized pieces of jewelry a student may wear while in lecture, lab, hospital clinical, and field settings:

- A watch
- One ring per hand (wedding sets count as one)
- Single post style earrings (one in each ear)

### **Earbuds/Headphones**

Earbuds and/or headphones (including hands-free devices for phones) are prohibited from being worn during lectures, labs, hospital, field, or capstone rotations.

### **Jacket/Rain Gear**

Students may wear a navy, one-quarter zippered pullover, with the appropriate School of Emergency Services markings (embroidered logo on the front, reflective “DSC/EMS INTERN” on the back, sold through the DSC EMS approved vendor.

### **Safety Vests**

An approved safety vest with the “DSC/EMS INTERN” in contrasting reflective materials on the back, a DSC logo/patch on the front left pocket that meets or exceeds ANSI type III safety vest requirements must be worn any time the student is participating in a fire/rescue/EMS clinical. These are not required for hospital clinicals, labs, or lectures. This vest must be accessed through an approved vendor.

### **PPE (Personal Protective Equipment)**

Proper personal protective equipment including eye protection, and respiratory protection (N95 or higher) is to be readily accessible for all hospital, field, and capstone rotations. Gloves are provided at each clinical site.

## **3.4 Personal Grooming**

### **Fingernails**

Fingernails must be trimmed to not extend beyond the end of the fingers. Fake nails or nail extensions are a health concern and may not be worn while in uniform. The risk of infection and spread of disease is always a concern. Clear nail polish is the accepted uniform standard.

## **Hair**

Hair must be neatly groomed and styled so that the length and bulk of the hair are not excessive, and that the hair does not present a ragged, unkempt, or extreme appearance, and does not touch the collar of the shirt.

Hair shall not be so long or loose as to provide an offensive handhold.

Hair color must be naturally occurring in the human species.

No ponytails may be worn at any time.

Students may wear braids and cornrows if the braided style is conservative, the braids and cornrows lie snugly on the head, and any hair- holding devices comply with standards.

All hair-holding devices must be plain and of a color as close to the recruit's hair as is possible or clear. Beads, decorations, ribbons, etc., will not be worn. Devices that are conspicuous, excessive, or decorative are prohibited.

## **Cologne/Scented Toiletries**

Students must not wear cologne/perfume or other strongly scented toiletries during any EMS training activities or clinical assignments due to the risk of patient sensitivity and/or allergies.

## **Tattoos**

Tattoos must be completely covered while on hospital clinical rotations.

## **Facial Hair**

Students must be clean shaven while enrolled in the EMT or Paramedic programs. Mustaches and beards are prohibited. Sideburns may not be longer than one inch and must not be excessively thick or bushy.

## **SECTION 4 - STUDENT CONDUCT**

### **4.1 See Daytona State College Student Handbook.**

### **4.2 Addressing Staff and Instructors**

Instructors and staff will be addressed as “Sir” or “Ma’am” or by rank unless otherwise specified by the instructor or staff member. Rank or title is always preferred and appropriate.

### **4.3 Attendance/Absence**

Students are expected to be in attendance for all lectures, labs, and clinical portions of the respective program. Failure to attend all lectures, labs, and clinical portions of the respective program may result in an incomplete or failing grade. Make-up assignments may be issued by your instructor. Please refer to your course syllabus.

### **4.4 Investigations/Complaints**

The EMS Department Assistant Chair shall investigate filed complaints and follow the Daytona State College Student Handbook procedure. Any incident requiring an investigation will result in notification of the Assistant Chair who shall coordinate all investigative procedures beginning with the intake of the initial complaint and continue throughout the judicial affairs process.

### **4.5 Falsification of Documentation or Plagiarism**

Any falsification of documentation or plagiarism found to be valid by the judicial affairs process may be grounds for dismissal. This includes misrepresentation of lab or clinical skills/patient contact documentation in the FISDAP tracking software.

### **4.6 HIPAA (Patient Confidentiality)**

Still and/or video photography is prohibited in all clinical and field settings. Students will not violate HIPAA (Health Insurance Portability and Accountability) policies, pursue patients, patient information (such as names, addresses, or phone numbers from any sources), and/or take still or video pictures of any patient or scene. Doing so are grounds for immediate suspension from the EMS Program and referral to Judicial Affairs. HIPAA confidentiality statements will be signed and maintained in your student file.

## **SECTION 5-SUBSTANCE USE POLICY**

**5.1 See Daytona State College Student Handbook for full policy.**

**5.2 Consumption of Alcohol Prior to Class and/or Clinical/Field Shifts**

Students are prohibited from consuming alcohol eight hours or less prior to the start of lecture, lab, or clinical/field setting, school-sponsored events, and class/event, and during lunch/dinner breaks. Students may be subjected to a Breath Alcohol Test. See Daytona State College policy for suspected impairment.

## **SECTION 6 – POLICY VIOLATION DOCUMENTATION**

- 6.1** Violation of the policies of Daytona State College Student Handbook, EMS Program Handbook, course syllabus, or clinical affiliate policies shall be documented on the CoAEMSP Student Counseling Form. If the violation is a result of Affective Behavior, then the CoAEMSP Affective Behavior Evaluation shall be included. If this event is a continuation of prior behavior, a CoAEMSP Performance Improvement Plan form should be included. See Appendices E, F, and G.
- 6.2** Students receiving four Student Counseling Forms will be required to meet with the Assistant Chair of the EMS department. Academic violations, behavioral violations, or anything that is a safety concern will result in a meeting with the Assistant Chair and may include meeting with the Director of the Charles M. Curb School of Emergency Services, even if it is the first violation.
- 6.3** All policy violation forms will be completed within 48 hours or less to be kept in the students' secure, centralized administration file.
- 6.4** Students who represent a safety concern will be reported to Campus Safety and/or 911 as appropriate. Concerns of this nature will be forwarded to the Judicial Affairs office for further action.
- 6.5** Affiliate agencies may refuse access or dismiss students without cause and the student will have no recourse against the college or the affiliate agency.

**APPENDIX A**

**MEDICAL CLEARANCE FORM  
REQUIRED TO RETURN TO CLASS AFTER ANY CHANGE IN MEDICAL STATUS  
AFTER ADMISSION TO THE PROGRAM**

**DAYTONA STATE COLLEGE  
EMT/PARAMEDIC TRAINING COURSE  
PHYSICIAN'S MEDICAL RELEASE**

\_\_\_\_\_ has been treated for the following condition(s):  
*Student's Name*

*(Please describe injury or illness)*

--

This student is participating in an EMT/Paramedic Training Course, which involves the following activities:

- the ability to wear full personal protective equipment and may include gloves, gowns, protective eyewear, N95 masks or cartridge respirators.
- the ability to perform CPR
- the ability to drag, lift, carry, and move weights up to 125 pounds.
- the ability to climb stairs,
- the ability to work in heat, water, and other hostile environments.

**This student may return to class with no limitations.**

Physician's Signature		Date	
Physician's Name <i>(please print)</i>			
Physician's Address			
Physician's Phone Number			

The student is aware that Daytona State College may verify the information above by contacting the physician who has signed this document.

Student's Name <i>(please print)</i>			
Student Signature		Date	

## **APPENDIX B**

### **DAYTONA STATE COLLEGE AFFILIATE BACKGROUND REVIEW POLICY**

The Daytona State College EMS program will utilize a committee made up of affiliate representatives when evaluating criminal histories of EMS Student applicants that cannot be cleared by the school using the background matrix. Any criminal history revealed by the required Level II background check that cannot be cleared by the school will be forwarded to the committee for review and final determination of the student's acceptance into the EMS program.

The following affiliates and EMS leaders will have a seat on the committee:

1. Volusia County Emergency Medical Services
2. Volusia County EMS Administration
3. Medical Director of the EMS Program
4. Volusia County EMS Providers
5. Volusia County Fire Chiefs Association
6. Halifax Hospital
7. Advent Health

A single dissenting vote from any affiliate representative can disqualify a student from participation into the program. All affiliates retain the right to deny facility access, without cause, to the student. Access to the affiliate facility is not assumed and must be **affirmed** by the affiliate representatives for any student who is unable to meet the Level II background requirements and that is not able to be cleared by the school based on the student background matrix. If the affiliate does not affirm the student's acceptance into their facility, it will be the same as a denial because the student will not have achieved a clearance that only the affiliate can provide.

It is preferred affiliates denying student's access do so in writing from the affiliate to the school before the school takes adverse action on the student's application. Denial may also be in the form of the school requesting acceptance from the affiliate and the affiliate denying granting access in writing. This is the same as refusing to affirm clearance of the student's background, thereby stopping the student's application from being processed to the stage of acceptance into the program. If the school cannot clear the student and the affiliate will not affirm a clearance, then the student would need to achieve the "affirmed" status to enter the affiliate facility.

**APPENDIX C**

**DAYTONA STATE COLLEGE  
COLLEGE OF HEALTH AND PUBLIC SERVICES  
SCHOOL OF NURSING/EMERGENCY MEDICAL SERVICES  
CONVICTION RECORD POLICY**

<b>CATEGORY 1</b>	<i>Bad checks, Municipal Ordinances</i>		
Occurrence	Time Period	School May Clear	Application to Committee
One or more times	No time factors	Yes	No
<b>CATEGORY 2</b>	<i>Petit Theft, DUI, Disorderly Conduct, Indecent Exposure, Prostitution/Soliciting, Drug Possession, or any Misdemeanor not listed in Category 4</i>		
Occurrence	Time Period	School May Clear	Application to Committee
One time	No time factors	Yes	No
More than one time	Less than 10 years	No	Yes
	More than 10 years	Yes	No
<b>CATEGORY 3</b>	<i>Property Crimes, Drug Possession/Substance Abuse, Violent Crimes with No Actual Harm, Other Felony Offenses Not Listed in Category 4 (Felony)</i>		
Occurrence	Time Period	School May Clear	Application to Committee
One or more times	No time factors	No	Yes
<b>CATEGORY 4</b>	<i>Sex Crimes, Child/Elder/Spouse Abuse, Hate Crimes, Violent Crimes with Actual Harm, Fraud, Medicaid/Medicare Fraud, Perjury (Felony).</i>		
Occurrence	Time Period	School May Clear	Application to Committee
One or more times	No time factors	No	Yes

**NOTES:**

1. Driving on a suspended license (DWLS) is not considered a reportable offense.
2. Arrests for bad checks, disorderly conduct or like charges that went to court but the only disposition was court costs may be cleared by school.
3. Applicants for licensure who have been convicted of a felony and their civil rights have not been restored, are not eligible for licensure and are not eligible to take the licensing examination. The application will be denied.
4. All cases involving fraud, aggravated battery, and/or actual harm to victim require committee review.
5. For applicants in pre-trial intervention program (PTI):
  - a. If the offense is one the school could clear if the conviction were upheld, then clear the screening.
  - b. If the offense is one the committee requires review, then inform the applicant that the application is incomplete until information is received on the disposition of the PTI.
6. For applicants on probation:
  - a. If the probation is for category 1- or one-time occurrence in category 2, the school may clear.
  - b. Any other probation must be cleared by the committee.

The purpose of this matrix is to determine which criminal offenses revealed via the required background check during the application process are reportable to the affiliate agencies that host the clinicals required by Florida Statute 401/FAC 64-E, within the requirements of FS 435.04, and Affiliation Agreements during a candidates EMT or Paramedic training program.

## **APPENDIX D – TECHNICAL STANDARDS**

Paramedics are healthcare providers that provide medical care and treatment for patients that have been involved in accidents, emergencies, or other crises. They often work in an out of hospital environment on board an ambulance or fire truck. Paramedics can also be found working at theme parks, emergency rooms, clinics, and doctor's offices.

**Paramedics need the ability to make swift decisions and stay calm.**

**Typical duties of the job include:**

- Driving and staffing ambulances and other emergency vehicles
- Responding to emergency 911 calls and working in dangerous areas
- Assessing patients, providing emergency treatment, and making diagnoses
- Monitoring and administering medication, and intravenous infusions
- Using specialist equipment including ventilators and defibrillators
- Reading ECGs and 12-leads, Dressing wounds/injuries, dealing with bloodborne pathogens and other scene hazards
- Transporting patients to hospital and continuing to provide treatment while in transit
- Providing hospital staff with confidential patient information including condition and treatment
- Helping provide patient care in hospitals and other medical facilities
- Communicating effectively with patients and their relatives/friends in times of extreme stress and confusion
- the ability to wear full protective equipment and may include helmet, protective coat and pants, suspenders, gloves, N95 Mask, Powered Air Purifying Respirators (PAPR) or breathing apparatus
- The ability to drag, lift, carry, and move weights up to 125 pounds.
- The ability to climb stairs and ladders.
- The ability to work in heat, water, and other hostile environments.

**Key skills for paramedics:**

- A caring and outgoing personality
- Effective communication skills
- The ability to make swift decisions and stay calm in highly active and potentially dangerous situations
- A satisfactory level of physical fitness
- Strong navigational skills and an awareness of mapping technology
- Resilience
- The ability to attend during nights, weekends, and Holidays as Clinicals are assigned on a Shift rotation (including holidays and weekends) is a standard requirement of the paramedic program.

This is a MINIMUM list of Technical Standards a paramedic student may experience during their training.



APPENDIX E – CoAEMSP STUDENT COUNSELING FORM



Committee on Accreditation  
of Educational Programs for the  
Emergency Medical Services Professions



**Student Counseling Form**

Program Number:  Date:

Program Name:  Course Number:

Student Name:  Course Start Date:

**Reason for Counseling:**

	Class	Lab	Clinical	Field
<input type="checkbox"/> Attendance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Academic Performance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Skill Acquisition/Performance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Affective Behavior	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Administrative Probation (financial/other)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**This student has been counseled regarding the following:**

Previous Performance Improvement Plan (PIP) Completed:	Y <input type="checkbox"/> N <input type="checkbox"/> Date: <input type="text"/>
Previous Counseling:	Y <input type="checkbox"/> N <input type="checkbox"/> Date: <input type="text"/>
Dismissal:	Y <input type="checkbox"/> N <input type="checkbox"/> Date: <input type="text"/>

**Student Comments:**

Student Signature:  Date:

Faculty Signature:  Date:

Program Director Signature:  Date:

**APPENDIX F – CoAEMSP AFFECTIVE BEHAVIOR FORM**



Committee on Accreditation  
of Educational Programs for the  
Emergency Medical Services Professions



**Affective Behavior Evaluation**

Program Number:  Date:

Program Name:  Faculty:

Student:  Course:

Please rate the following attributes of professional behavior and affect. Some examples are included but others may be appropriate.	Needs Improvement	Fair	Good
<b>1. Integrity</b>  Consistent honesty; trustworthy with the property of others; trustworthy with confidential information; complete and accurate documentation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>2. Compassion</b>  Acts to support others who are suffering, actively listens to patients and families and demonstrates concern.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>3. Accountability</b>  Takes responsibility for actions, complete assignments, open to constructive feedback.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>4. Respect</b>  Polite to others, does not use derogatory or demeaning terms; has a manner that brings credit to the profession.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>5. Empathy</b>  Responds appropriately to the response of patients and family members; demonstrates respect for others; supportive and reassuring to others.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>6. Self-Motivation</b>  Takes initiative to complete assignments; takes initiative to improve and/or correct behavior; takes on tasks and follows through without constant supervision; shows enthusiasm for learning and improvement; consistently strives for excellence in all aspects of patient care and professional activities; accepts constructive feedback in a positive manner; takes advantage of learning opportunities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Professional Affective Behavior Evaluation  
Revised 3-2022

<b>7. Appearance and Personal Hygiene</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Clothing and uniform is appropriate, neat, clean, and well maintained; good personal hygiene and grooming.			
<b>8. Self-Confidence</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates the ability to trust personal judgment, demonstrates an awareness of strengths and limitations; exercises good personal judgment.			
<b>9. Communications</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Speaks clearly; writes legibly; listens actively; adjusts communication strategies to various situations.			
<b>10. Teamwork and Diplomacy</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Places the success of the team above self-interest; not undermining the team; helps and supports other team members; shows respect for all team members; remains flexible and open to change; communicates with others to resolve conflict.			
<b>11. Patient Advocacy</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Does not allow personal bias or feeling interfere with interactions with others; places the needs of patients above self-interest; protects and respects patient confidentiality and dignity.			
<b>12. Cultural Competency</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maintains awareness of the assumptions and biases related to cultural issues and how they may affect patients, peers and all others involved in the delivery of medical care. Seeks to learn about others' cultural identities and looks at how one's own background and social environment have shaped the individual. Provides culturally competent, equitable and medically appropriate care to each and every patient no matter their background.			

**Additional Pertinent Comments:**

**Student Signature:**

**Date:**

**Faculty Signature:**

**Date:**



Committee on Accreditation  
of Educational Programs for the  
Emergency Medical Services Professions



**Performance Improvement Plan (PIP)**  
**Confidential**

Student Name:

Date:

Program Name:

Course Number:

Course Start Date:

The purpose of this Performance Improvement Plan (PIP) is to identify areas of concern and gaps in your performance, reiterate the Paramedic program expectations, and allow you the opportunity to demonstrate improvement and commitment.

**Areas of Concern:** issues and/or poor performance and/or behavior.

1.	
2.	
3.	

(NOTE: All response boxes on this form will automatically expand as text is entered. Additional rows can be added to this table by placing the cursor in the bottom, right hand box and pressing 'tab'.)

**Observations, previous discussions, or counseling:** dates/times the issues were addressed in the recent/relevant past. Reference previous documents when applicable.

1.	
2.	
3.	

(NOTE: All response boxes on this form will automatically expand as text is entered. Additional rows can be added to this table by placing the cursor in the bottom, right hand box and pressing 'tab'.)

**Improvement goals and expectations:** goals related to areas of concern to be improved and addressed and timelines.

	Goal/Expectation	Required Completion Date
1.		
2.		
3.		
4.		

(NOTE: All response boxes on this form will automatically expand as text is entered. Additional rows can be added to this table by placing the cursor in the bottom, right hand box and pressing 'tab'.)

**Resources:** resources available to complete the improvement activities.

1.	
2.	
3.	

[NOTE: All response boxes on this form will automatically expand as text is entered. Additional rows can be added to this table by placing the cursor in the bottom, right-hand box and pressing "tab".]

**Timeline for improvement, expectations, and consequences:**

Effective immediately, you will be expected to make regular progress on the plan outlined above. Failure to meet or exceed these expectations, or any display of misconduct will result in further disciplinary action, up to and including dismissal from the Paramedic program. In addition, if there is no significant improvement to indicate that the expectations and goals will be met within the timeline indicated in this Performance Improvement Plan (PIP), your enrollment will be terminated. Failure to maintain performance expectations after the completion of the PIP may result in additional disciplinary action up to and including dismissal from the Paramedic program.

The contents of the PIP are confidential. Should you have questions or concerns regarding the content, you will be expected to follow up directly with the assigned Paramedic program faculty member.

During this performance improvement process, you are expected to communicate on a regular basis with the Paramedic program faculty to discuss your progress.

PIP Start Date:

PIP Re-evaluation Date:

This information has been reviewed with the student.

Student Signature:

Date:

Faculty Signature:

Date:

Program Director Signature:

Date:

Other Signature:

Date:

**APPENDIX H – STUDENT ACKNOWLEDGEMENT AND RECEIPT FOR DAYTONA  
STATE COLLEGE EMS HANDBOOK**

Date \_\_\_\_\_

Student Name (Print) \_\_\_\_\_

I have received the Daytona State College EMS Handbook. I understand that by registering in any class of the EMS Program, I am declaring that I have read, understand, and am pledging my compliance with the policies, practices, and protocols of this program. I understand that failure to follow these policies, practices, and protocols may result in an injury or illness to myself or others and could result in my dismissal from the program.

Student Signature \_\_\_\_\_

EMS Program Representative Signature \_\_\_\_\_