

Oklahoma City Community College

# Physical Therapist Assistant Program

Clinical Education Manual 2019-2020

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## **PREFACE**

Clinical Education is an integral component of the Oklahoma City Community College (OCCC) Physical Therapist Assistant (PTA) Program. Often referred to as “where the rubber hits the road”, it is the compilation of these eighteen weeks that prepares the student to enter the profession of physical therapy as a competent physical therapist assistant.

While enrolled in each clinical education course the student is assigned to an **off campus physical therapy setting** such as a hospital, outpatient clinic, nursing home, etc. in which (s)he will acquire the behaviors and skills required to satisfactorily meet the required elements of entry-level practice as a novice PTA. While participating in *any* off campus physical therapy setting as a PTA Program requirement, each student is directly supervised by a licensed physical therapist (PT) or PTA. This individual serves as a member of the OCCC PTA Program’s clinical faculty as clinical teacher, supervisor, mentor and role model. Each clinical education site is selected for the expertise of the therapy staff; patient/client variety; exposure to integral, “non-patient care” operations and a commitment to standards of excellence in all aspects of therapy practice.

Each student is required to complete 720 hours on site in the clinical education setting. These experiences are arranged within the curriculum to afford each student the opportunity to assimilate the information and perform the skills (s)he has successfully completed within the didactic curriculum to date. Specifically, earning a “C” (74%) or better and a PTA Program GPA of 2.5 or better in all previous PTA coursework.

PTAs are required by the Oklahoma Practice Act, and in accordance with the American Physical Therapist Association, to work solely under the supervision of a Physical Therapist. The PT:PTA Partnership has been identified as an effective, efficient way to deliver high quality, competent physical therapy care. The OCCC PTA Program enjoys a host of loyal clinical education sites committed to delivering exceptional care along with proper utilization, supervision and role-delineation of the PT versus PTA and adherence to ethical/legal practice.

### **CLINICAL EDUCATION CONTACT INFORMATION**

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## **RIGHTS OF ALL PARTIES INVOLVED**

Clinical education is a privilege and not a 'right'. The student is a guest in the facility in which (s)he is assigned. OCCC retains a specific legal, contractual agreement with each entity in which a student participates off campus as a PTA Program clinical education requirement. This, Affiliation Agreement, often referred to as "contract", outlines specific expectations of the college, the ACCE, the clinical site and the student. A copy of the standard contract is in this manual (appendix A). Responsibilities of each party involved are discussed further in this manual. Students must read and agree to adhere to behavioral standards as evidenced by signing the documents-Student Ethical Practice Agreement and Unacceptable Conduct During Practicum Placement (Appendix B and C). These documents are reviewed and signed by the student prior to each full-time clinical affiliation.

## **PATIENT RIGHTS**

The main purpose of clinical education is to provide students experience with providing all aspects of patient care appropriate for a PTA as directed by the (PT) Therapist of Record while directly supervised by the PT/PTA clinical instructor. In order to fulfill that purpose the PTA student must have 'hands on experience' with data collection and intervention.

Regardless of authentic intent, the patient/client has the right to refuse to participate in treatment provided by a student. In order to have the ability to refuse, the patient must be informed of potential student involvement. This occurs by:

- The student must wear an OCCC name tag that clearly identifies them as an SPTA.
- The student must introduce themselves as an OCCC **student physical therapist assistant**.
- The site must ensure the patient consents to the treatment offered.
- The student and site must respect and honor the right of the patient to refuse.

## **CLINICAL EDUCATION COURSES**

(720 total hours required)

*Every effort is made to place students in facilities in which they are likely to succeed. Students request sites based on a number of factors, including interest in a particular patient population; exposure to data collection &/or interventions necessary to demonstrate the depth & breadth required for entry-level practice; &/or the need/desire to perform the clinical in a particular geographical location. These requests are taken into consideration when the students are assigned.*

### **PTA 1312 Initial Practicum (Integrated Clinical Experience)**

This two credit hour, four week-160 hour, full-time clinical experience is integrated into the summer following the first year of the PTA Program. Student participation in the clinic occurs following successful completion of all coursework and a comprehensive practical examination. This rotation is limited to those sites that can provide a student

with the opportunity to treat and interact with patients utilizing data collection and intervention skills introduced within the first year of the didactic curriculum. Opportunities to interact with patients and utilize the skills the students have demonstrated competency over are the primary objective of these four weeks.

### **PTA 2034 Practicum I & PTA 2134 Practicum II (Terminal Clinical Experience)**

The terminal clinical practicums are both four (4) hour credit courses, seven weeks each occur during the spring semester of the second year of the program. These terminal internships follow successful completion of all didactic PTA coursework and a comprehensive practical examination. The ACCE assigns each clinical based upon the request and needs of the student in order to attain exposure and practice with the necessary breadth and depth for entry-level competency to join the workforce in central Oklahoma.

### **TRAVEL REQUIREMENTS**

Students are required to travel to and from the clinical sites on the days they are assigned to report to that site. Travel in most cases is limited to less than thirty miles from the student's living arrangement. The need for a student to be assigned to clinical site in close proximity to home due to factors such as caregiver responsibilities are taken into careful consideration.

### **EXPENSES INCURRED BY THE STUDENT**

The student is responsible for the expenses incurred during travel, required attire (most commonly khakis or scrubs), proper footwear, name tag, gait belt, all compliance related testing, liability insurance and meals. Any materials required by the student to present the in-service he/she is to provide at one clinical site is also the responsibility of the student.

**\*New 2018: if clinical site requires, student may incur a fee of \$36.50 for My Clinical Exchange.**

### **CLINICAL COURSE FINAL GRADES**

The clinical instructor completes the evaluation of the student using Clinical Performance Instrument (CPI). The Academic Coordinator of Education (ACCE) is responsible for the ultimate assignment of the student grade of either Satisfactory (S) or Unsatisfactory (U) based upon the review of the CPI and assimilation of all required documents/assignments.

Specific grading criteria is outlined in each course syllabus. The student is expected to perform at a successively higher level of competency at each clinical rotation. Ultimately, the student will be capable of entry-level competency in each of the fourteen criteria assessed on the CPI and have exposure to every skill on *The Minimal Required Skills of Entry Level Physical Therapist Assistant – Data Collection* (Appendix D) & *Provision of Procedural Interventions* (Appendix E).

## **CONTRACTS WITH CLINICAL SITES**

The ACCE determines the number and type of sites required to fulfill the goals of the program. The ACCE conducts the initial interview to discuss expectations required to be a site for the OCCC PTA Program. If deemed mutually agreeable to move forward, the necessary information is collected in order to initiate the legal affiliation agreement between said entity and the College. This information is given to the Clinical Affiliation Compliance Administrator who prepares the contract, obtains signatures from OCCC and mails to the site. The site approves the contract or makes changes. If the contract is approved, signed and returned, the site is added as a potential clinical site warranting further exploration by the ACCE to determine readiness of designated clinical staff to serve in the role of clinical instructor. If the contract requires changes, this negotiation occurs between the clinical site and Oklahoma City Community College.

## **ACADEMIC COORDINATOR OF CLINICAL EDUCATION (ACCE)**

### RESPONSIBILITIES:

The college employs a full time faculty member who, as a portion of the job responsibilities, serves as the Academic Coordinator of Clinical Education. The clinical education sites can expect the following from the ACCE:

- **Accessibility:** will be available and provide contact information to each clinical site. While on clinical assignment, the ACCE will conduct a midterm visit to determine satisfactory placement and progress is occurring. At any point during the clinical rotation, the ACCE is readily available to discuss issues/answer questions that arise.
- **Educational Experiences/Training:** will coordinate educational experiences that relate to clinical education and is willing to provide in-services at facilities when requested. These offerings may be eligible for CEU's and will be offered at a free or reduced rate to OCCC clinical instructors.
- **Information:** will provide clinical education facilities with information regarding the program. The information will be provided via:
  - Clinical Education Manual*-available on PTA web page and via hard copy
  - Bi-annual Clinical Education Meeting
  - Clinical Education Notebook-each student is responsible for maintaining a 3-ring binder containing essential documents that pertain to the Clinical Education Program & each specific clinical course. The student is responsible for the accessibility of an up-to-date Notebook and for reviewing it with their clinical instructor at/near the beginning of each clinical assignment.
  - Phone calls-midterm, questions regarding clinical education
  - Site visits
  - Correspondence-request for placements, student assignments & contact information

- Compliance: will work with the Clinical Affiliation Compliance Administrator to insure that each student is current with all required documentation & training as required by OCCC & the specific facility. (See Appendix A for OCCC compliance requirements)
- Monitoring of contracts- will communicate with the Clinical Affiliation Compliance Administrator to ensure that a current contract is in place between the college and the individual clinical site prior to the student arriving at the site for the rotation.

## EVALUATION

The ACCE, who reports to the PTA Program Director and Dean of the Division of Health Professions, creates an annual development plan and participates in an annual appraisal process. A major component of both is devoted to the clinical education responsibilities with ongoing efforts to enhance communication to all stakeholders and continue the development of clinical faculty. The college supports participation in the APTA Education Section especially Clinical Education & PTA Educators Special Interest Group, attendance & presenting at the annual APTA Educational Leadership Conference meetings and other APTA meetings, such as Combined Sections with focus on clinical education. The college is an active member of Central ACCE Consortium, a four state consortium including Arkansas, Kansas, Oklahoma and Missouri.

Feedback from clinical faculty and employers of graduates about every aspect of the OCCC PTA Program is regularly sought and encouraged. During each midterm visit and at the conclusion of each clinical rotation, feedback is sought from the clinical instructor regarding communication, student preparedness, accessibility of the ACCE, assistance with concerns and questions. Surveys are sent annually to each program graduate requesting their input and employer input with return envelopes provided so that the surveys may be returned confidentially to the program director.

## **CLINICAL INSTRUCTORS** (SCCE and CI)

Depending on the size of a clinical facility there may be one or more PT/PTA's who are designated as clinical instructors (CI). Larger facilities may have a designated site coordinator of clinical education (SCCE) who coordinates the facility's clinical education program and assigns students to the various clinical instructors. The clinical instructor is a PT or PTA who meets the necessary expectations and demonstrates a desire and willingness to give back to the profession he/she is a part of by mentoring, teaching and providing critical feedback to a student PTA.

## **REQUIREMENTS**

The clinical instructor is required by the OCCC PTA program to:

- Have at least one year of experience in the field of physical therapy prior to accepting full-time PTA students.
- Be either a PT or a PTA. If the full-time CI is a PTA, the PTA is required to ensure the PTA student has interaction with the supervising PT during the

rotation. The minimal interaction includes the ability of the PTA student to observe the physical therapist perform patient evaluations and to interact with the PT in a discussion regarding the PT's rationale in determining the plan of care; to talk to the PT in person when there is a question regarding goals or plan of care; and to report to the PT regarding change of status.

- Demonstrate competency in physical therapy skills as a PT or PTA , specifically for the setting in which he/she currently practices.
- Adhere to all legal and ethical standards of physical therapy.
- Have a clear understanding of the PT/PTA role and readily identify when the skill is outside the scope of care for the minimal competence of the SPTA/GPTA.
- Display willingness and interest in working with students.
- Regularly participate in self-assessment and reflection.
- Develop skills necessary for supervising/mentoring student PTA's.
- Accurately delineate and translate the expectations of an **entry level PTA** into meaningful behavior & action in the practice setting.

The Students will evaluate the CI during and after the clinical experience.

The following two items are strongly preferred but not required:

- APTA Credentialed Clinical Instructor
- APTA and OPTA member

## **RESPONSIBILITIES**

Oklahoma City Community College expects the clinical instructor to:

- Incorporate the objectives of the clinical course into the students learning objectives
- Orient the student to the facility within the first day (or two as is feasible)
- Develop and plan appropriate learning experience that include direct patient care and other non-direct care opportunities
- Communicate expectations to the student at the beginning of the affiliation
- Communicate regularly with the student and ACCE regarding student progress
  - inform student immediately if he/she is not meeting expectations
  - inform ACCE immediately if the student is not meeting expectations
- Formally evaluate the student at midterm and final
  - document student progress at a minimum at midterm and final performance on the CPI
  - meet with student to review progress and the CPI document
  - meet with ACCE at midterm or as often as needed to review student progress or develop a plan of remediation as needed

## **BENEFITS**

Clinical instructors receive no monetary compensation for the performance of these duties. The clinical faculty members are allowed to utilize/participate in:

- Library-clinical faculty may use library free of charge. For special requests confer with ACCE for assistance.



- OCCC faculty development workshops- Clinical educators are invited to participate in OCCC faculty development workshops. This schedule varies. Consult with ACCE or Program Director for more information.
- Recreational facilities-clinical faculty may use the portion of the recreational facilities that are offered free of charge to the college employees. In order to access the facilities, a CI must contact the ACCE who will make arrangements with the recreational department.

Non- tangible benefits of serving as a clinical instructor include altruism-‘giving back to the profession what was given to you’. The field of physical therapy has many dedicated individuals who willingly provide this service. In addition, the clinical instructor gains valuable supervisory experience that can be an important asset in the development of a personal career ladder that includes teaching, supervision and/ or management. The skills learned as a clinical instructor: supervising, developing an action plan with measurable goals, providing critical feedback, creating and delivering an evaluation of performance... are directly transferable to securing these types of administrative roles.

#### ASSIGNMENT

In accordance with the Section for Education, American Physical Therapy Association voluntary agreement “*Uniform Requests for Clinical Placement*”, in early March the ACCE notifies all OCCC PTA clinical education sites of dates for the following year requesting clinical placements be saved. Subsequently, specific requests for confirmation are sent the semester prior to each clinical course to those specific clinical sites that are appropriate based on the objectives for that clinical. The clinical site returns the request utilizing a confirmation form which specifies the number of students the site is willing to accept and the clinical instructors assigned to the slot. The ACCE reviews the confirmed lists and makes phone calls to obtain additional sites needed to meet the needs of that student cohort &/or to clarify information. Students complete a reflection form providing information and requests for clinical placement. The ACCE then assigns based on numerous factors including but not limited to: the student’s requests (especially if provided thoughtful reflection regarding career planning & goals); the types of patients/clients, setting, experiences needed to meet entry-level competencies for graduation; the specific clinical instructor(s) identified at specific clinical available (in order to enhance success in the CI:student match)... The compiled assignments are sent to each participating clinical site along with a huge thank you for being willing to continue to support our students & program, the assigned student(s) contact information, the clinical education course syllabus and reminder to contact me for any questions.

#### EVALUATION

The student is required to use the tool developed by the APTA to evaluate the clinical site and the clinical instructor. As a part of the students professional development plan the student is also required to review this evaluation with the CI and obtain the CI’s signature. The student completes another OCCC PTA Program form to provide the ACCE with in depth, personal reflections about their accomplishments, challenges &

insights. At the conclusion of each clinical course, each student participates in a mandatory reflection workshop. This is when all required documentation is submitted followed by small and large group discussion regarding students' experiences. The data collected during midterm visits, from the CPI and the various reflection tools are reviewed by the ACCE to ensure that the students are receiving the depth and variety of clinical education needed to successfully pass licensure and practice as a competent PTA. The forms are also used to determine clinical coordinator/instructor effectiveness, planning of the learning experience, level of supervision, teaching style of the clinical instructor, and that ethical, legal, evidence-based current therapy practice is occurring at this facility. This information is assessed to determine if a site or individual CI may be interested in an inservice/further development; collectively obtaining ideas for clinical instructor workshop topics, areas to critically assess within the PTA curriculum and ultimately if a site is meeting the expectations, standards and requirement to be an OCCC PTA Program clinical placement location.

#### DEVELOPMENT

##### *Determination of needs*

Clinical instructors are encouraged to provide feedback to the ACCE regarding his or her questions, interests, developmental needs regarding clinical teaching.

##### *Bi-annual meeting and student reception*

Every other year, OCCC PTA faculty invite clinical coordinators and instructors to campus for a college, division & program update, information & discussion regarding local, state, federal issues affecting the supervision, role, scope of work & reimbursement for services provided by the PTA, and to gain essential feedback from them about all such issues, as well as, how the OCCC PTA Program can continue to improve and meet the workforce needs/demands. Following this, the students host a reception and the OCCC Clinical Instructor of the Year is honored. This is followed by a 2-3 hour CEU course approved by the Oklahoma Board Medical Licensure & Supervision.

##### *Courses related to clinical education*

Courses are held periodically free or at reduced cost to the PTA clinical faculty. These courses are submitted to the Board for approval of continuing education units.

##### *Correspondence/Communication*

Email is the predominant method of blast communication to clinical coordinators and clinical instructors. Phone and face-to-face meetings occur regularly as requested by the individual or site and/or when the ACCE deems necessary/desirable. Frequent, clear, open communication is the KEY to a successful clinical education program: for all stakeholders – clinical institution, clinicians, students and academic program faculty.

#### ***APTA CLINICAL INSTRUCTOR CREDENTIALLING PROGRAM***

The OCCC PTA faculty values the importance of clinical instructors gaining knowledge and expertise in the area of appropriate supervision and mentorship of students and future PTA's. The APTA Credentialing Program has been offered regularly in the local area

with upcoming dates pending. Dates for this workshop with locations throughout the United States are listed on the APTA website. [www.apta.org](http://www.apta.org)

## **CLINICAL SAFETY**

### **ENSURING THE STUDENT IS SAFE TO PRACTICE IN THE CLINIC- COMPREHENSIVE SKILL CHECKOUTS**

The Physical Therapist Assistant (PTA) Program at Oklahoma City Community College requires that each student perform a comprehensive check out (practical exam) of skills prior to entering PTA 1312 Initial Practicum. The comprehensive check outs are sequenced in the spring semester of the first year in PTA 1151 Clinical Prep I and a final comprehensive check out prior to entering PTA 2034 Practicum I and PTA 2134 Practicum II, which occurs in the final didactic semester of the program in PTA 2021 Clinical Prep II. These check outs are described in each course syllabus to inform the student that they will be tested over the material in each course in a final comprehensive manner. The final comprehensive checkouts factor into the final grade for the Clinical Prep courses. The final checkouts DO determine whether a student may be allowed to proceed in the program and enroll and participate in the clinical practicums.

The PTA program and faculty are committed to allow into the clinical portion of the curriculum only those students who have demonstrated **SAFE** performance on these practical exams. The faculty makes the best attempt possible during these exams to simulate the clinical environment during the lab sessions, the individual skills check outs and final comprehensive check outs. Patient safety is the utmost concern and the expectation of the student is that safety will be his/her number one priority.

A breach of safety is defined as ‘any action that could potentially place a patient at risk for injury’. For consistency purposes the faculty will determine what items in each checkout scenario will automatically determine a breach of safety, such as ‘not locking the brakes on the wheelchairs, failure to use a gait belt, etc. These items are noted on the checkout grading forms. Students are provided with the grading criteria prior to the practical exam. In those items that require problem solving and judgment, such as where to guard the patient for a particular transfer, the student is allowed to make safe choices provided that they can give appropriate rationale for their choice.

Safety issues are addressed throughout the curriculum, but are introduced early in PTA 1013 Introduction to Physical Therapy. Content areas include: managing patients with a variety of issues and with interventions such as bed positioning, mobility, transfers, and gait training. As each student progresses through the various courses in the curriculum, prior to each skill checkout, he/she is informed of critical incidents that will automatically result in failure of a particular checkout due to safety concerns.

The failure to demonstrate safety is a major concern and could delay or permanently prevent the student from enrolling in the clinical courses and in entering the clinical

setting. In addition, the student must demonstrate the ability to provide an effective intervention which includes the clinical reasoning skills to provide the rationale for that intervention. The student could provide a safe treatment but NOT provide an appropriate/effective treatment. This inability to provide an appropriate treatment or general lack of technical skills could also result in failure of a checkout. Failure of a comprehensive skill checkout requires that the student retake the exam with two faculty members present and the examination to be re-recorded on video. Failure of the second examination requires the student and faculty develop a contract of remediation. Failure of the third checkout will result in dismissal from the program.

## **EXAMPLES OF SAFETY FACTORS THAT WOULD RESULT IN AUTOMATIC FAILURE:**

### **GAIT**

- Failure to use gait belt
- Failure to instruct and monitor weight-bearing restrictions
- Unsafe guarding of the patient during fitting of device and/or ambulating
- Failure to adjust the device if the height of device poses a safety concern

### **TRANSFERS**

- Failure to use gait belt
- Failure to lock brakes on wheelchair
- Failure to observe weight-bearing precautions
- Choice of an inappropriate transfer if that choice would result in a breach of safety

### **MODALITIES**

- Failure to correctly identify target tissue/phase of healing
- Failure to safely operate any equipment

### **EXERCISE**

Exercise type that would be contraindicated (example-resistive when active assist is what is ordered) due to the specific diagnosis/condition and stages of injury.

Select/instruct/perform an exercise that would be detrimental and/or contraindicated due to the simulated patient's condition/diagnosis and for stages of injury, example: restrictive when AAROM is appropriate.

### **JUDGEMENT**

Attempt to perform any intervention in which SPTA is not trained or competent to perform. Failure to address a goal or treatment intervention in the physical therapist's plan of care. In an instance where a portion of the scenario contains an intervention the student is not competent or trained to perform, (example- Joint mobilization) the student should defer and state the appropriate action that they would take.

## **BODY MECHANICS**

Use of body mechanics by the student that would place the student and/or the simulated patient in an unsafe position.

## **PATIENT PRECAUTIONS AND CONTRAINDICATIONS**

Failure of the student to identify, observe and instruct the patient in precautions and/or contraindications.

## **CLINICAL PRACTICUM REQUIREMENTS**

1. **Coursework-** All required coursework with the PTA prefix and the BIO courses (BIO 1314, 1414, and 2102) must be completed with a 'C' or better and a Program GPA of 2.5 for the student to enroll to enter into the clinical practicums.
2. **Skill checkouts-** The student must successfully pass a comprehensive checkout during Clinical Prep I and II prior to the Initial Practicum and prior to Practicum I/II. Each of the checkouts will consist of a realistic patient scenario that may include any data collection skill or treatment intervention skill learned in prior semesters. The student is expected to assimilate the information provided and treat the 'patient' as a PTA student would. The student must communicate with the 'patient' and appropriately document the treatment session.
3. **Enrollment-** Student must be enrolled in the required practicum
4. **Health and Insurance-**All required information must be complete and in the student files.
  - Health information-the student must have current:
    - Two Step TB test, Quantiferon Gold or chest x-ray and release for public contact
    - AHA BLS for Healthcare providers
    - MMR-two
    - Two varicella vaccines or a varicella titer
    - Hepatitis B (HBV)-proof of three vaccines, titer or declination statement
    - Flu shot
    - Tdap \*New 2018
  - Receipt for student liability insurance- must be purchased the first week of class EACH fall semester and copy of receipt turned in to division office.
  - Complete required MedCom-Trainex materials (BBP, HIPAA, and Sexual Harassment Training) and submit certificates to the HP Division office by the third week of the program. Must be renewed annually.
5. **Background Report/Drug Testing**
  - Both a nationwide background report and a random 10-panel drug test be required. Each student will need to register and pay for these items

through SurScan.com. The nationwide background report must be completed by the third week of the first fall semester of the program. More information will be provided regarding the random drug testing at orientation and in the PTA Student Handbook.

6. **CLINICAL MEETINGS-MANDATORY ATTENDANCE**-these will be scheduled by ACCE:
  - Faculty evaluation of the student's progress on the generic abilities
  - Post clinical processing meetings
  
7. **SUPPLIES**-student must purchase **PRIOR** to the first clinical rotation:
  - 1 inch white 3 ring binder with a plastic slip on the front. Put your name on the inside.
  - Gait belt-Provided in lab supply kit from first semester. Be sure to write your name on it with a permanent marker prior to taking it to the clinic.
  - OCCC PTA student name tag-required-provided by PTA Program
  
8. **ATTITUDE**
  - During the clinical rotation the student must demonstrate a positive attitude that contributes to learning. This attitude is reflected by, but is not limited to, the generic abilities listed below:
    - interest
    - initiative
    - effective interaction with peers and patients
    - helpfulness
    - timeliness
    - respect
    - responsibility for one's own learning
    - ability to accept constructive feedback
    - professionalism
  
  - These behaviors are considered to be equally as important as competent clinical skills and **must** be exhibited by the student in order to successfully complete the clinical internship. Identification of problems in any of these 'attitudinal' areas may require that the student either (1) have a plan (mutually agreed upon by the CI, ACCE, and student) for remediation or (2) be removed from the clinical site.
  
9. **COMMUNICATION** –student is responsible for communication with the ACCE during the clinical internship. Communication is **KEY** for a successful internship. The student must:
  - Use OCCC campus e-mail to communicate at required intervals.
  - Be available at the scheduled time for the mid-term visit.
  - Communicate early and appropriately if there is a problem while on the rotation.

## **RISK MANAGEMENT**

### SAFETY OF STUDENTS WHILE ON CLINICAL PRACTICUMS and IN LABORATORY CLASSES (on and off campus labs)

#### **Oklahoma City Community College Division of Health Professions Incident and Exposure Notification Policy/Procedure (suspected or known)**

® May 2019

The following procedures should be followed if a student has an incident, receives a needle stick or exposure to blood or body fluids during lab, clinical, fieldwork, field internship, or any other educational site.

### INITIAL NOTIFICATION

The student should immediately inform their clinical instructor / staff at the facility where the event occurred. That individual will provide direction of the following:

- a. If the event occurs on campus, the faculty/staff will direct student to the Clinical Affiliation Compliance Administrator (CACA) / Division Insurance Coordinator within **48 hours**. The CACA will forward documentation of event to Risk Management/Legal Counsel for record.
- b. If the event occurs off campus and there is an OCCC fulltime faculty, clinical instructor, or preceptor on site, the student should notify that individual immediately. The student and instructor/preceptor will each document his/her knowledge of the events. No patient names may be used. Include the date, area of the facility (if applicable), time, and patient identification number if available. This documentation will be forwarded to the CACA / Division Insurance Coordinator **within 48 hours**. The CACA will forward documentation of the event to Risk Management / Legal Counsel for record.
- c. If the event occurs off campus and there is no OCCC fulltime faculty, clinical instructor or preceptor on site, the student should notify the person at the facility who is overseeing their clinical experience. The student will document his/her knowledge of the events. No patient names may be used. Include the date, area of the facility (if applicable), time, and patient identification number if available. This documentation will be forwarded to the CACA / Division Insurance Coordinator **within 48 hours**. The CACA will forward documentation of the event to Risk Management / Legal Counsel for record.

## **TREATMENT**

1. **During the clinical shift in which the incident / exposure occurred:**
  - a. the student should have baseline blood work drawn and/or baseline tests performed at the clinical site if the facility has that capability OR
  - b. the student should report to their personal physician, a clinic, or a hospital of choice for treatment.
  - c. in or preference where they acquiretreatment, the student may report to one of the following St. Anthony HealthPlex locations



**Incident and Exposure Notification Policy/Procedure (suspected or known)  
Quick Reference Checklist**

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**Exposure / Incident Occurs for both On / Off-Campus events:**

- Notify Lab/Clinical Instructor or Preceptor
- Follow protocol - Clean, wash, base line blood draw, etc. Whatever treatment is required for your particular case.
- Notify Shelly Tevis, Compliance Administrator (within 48 hrs of event)  
[stevis@occc.edu](mailto:stevis@occc.edu) - 405-682-7507
- Document (student and faculty) incident and provided documentation to Compliance Administrator
  - *Documentation should be as detailed and accurate as possible and should be HIPAA compliant*
- Fill out forms (Needle-stick, Incident, Claim, etc. forms) provided by Compliance Administrator
- Meet with OCCC Police to fill out required report – required by the Cleary Act – a Federal Statute.

**If treatment occurs where billing is required:**

- At time of treatment, request a copy of Diagnosis, Treatment, and any follow up treatment suggested
  - *Request a UB04 or HCFA form from place of treatment when possible. This is the form insurance will need to pay claim*
- Provide the aforementioned documentation to Compliance Administrator
- Provide any/all billing to the Compliance Administrator who will work with students to file claim

*\*Note - Student Accidental Medical insurance is secondary to a student's personal health insurance. If a student does not have personal health insurance, the Student Accidental Medical will become their primary for this event only.*

## **CLINICAL FORMS AND AGREEMENTS**

## CLINICAL ROTATION AGREEMENT

THIS AGREEMENT is made and entered into as of June 16, 2015 between **Oklahoma City Community College** (the “School”), and **NAME OF FACILITY** (the “Facility”).

1. **Clinical Rotations.** The School shall arrange clinical rotation experience (“Clinical Rotations”) for Oklahoma City Community College health care students (“Students”) at the Facility. The School and the Facility shall mutually determine the scope of the Clinical Rotation programs, the schedule of student assignments and the number of Students who may participate in the Clinical Rotations.
2. **Term.** “This agreement shall be effective June 16, 2015 and shall continue until further written notice of the Agency or School. It may be terminated by either upon (90) days written notice thereof: provided, however, that students shall be allowed to complete their clinical experiences should termination occur during a semester. Either party may terminate the agreement through written notification to the other party in the event of material breach of the Agreement.
3. **Responsibilities of the School.**
  - a. The School shall designate a School employee or another individual retained by the School (the “Clinical Instructor”) to serve as the coordinator for the Clinical Rotations to work directly with Facility personnel and coordinate all the activities of Students.
  - b. The School shall designate one or more of its instructors or faculty members (“Instructors”) to instruct and supervise Students during the Clinical Rotations.
  - c. The School shall provide a roster of the names of the Clinical Instructor, Instructors and Students (the “Roster”), along with a rotation schedule, to the Facility before the Clinical Rotations begin.
  - d. For each Instructor and Student who will participate in the Clinical Rotations, the School shall provide to the Facility verification of the following immunizations and tests: (i) a complete Hepatitis B vaccination series (series of three or waiver); (ii) Two negative PPD readings or chest x-ray with clear for public contact letter; (iii) MMR vaccination(s) or positive titer(s); (iv) Varicella vaccination(s) or a Varicella titer; (v) a background check(s), and (vi) drug testing and complete the required annual education to include HIPAA, BBP, etc.
  - e. The School shall require that each Student and Instructor before beginning the Clinical Rotations have current CPR certification that meets standards acceptable to the Facility.

- f. The School shall instruct Students that they are not permitted to perform any of the following: (i) double-check on medications or blood products; or (ii) begin or discontinue blood products, chemotherapy, or experimental drugs and therapies.
  - g. The School shall instruct Students that they are not permitted to accept orders from physicians or other health care professional in person or by telephone or call a physician or physician's office to obtain an order.
  - h. The School shall require Students to have transportation to and from the Facility, to arrive and depart promptly, and to park in areas designated by the Facility.
  - i. The School shall be responsible for all actions, activities and affairs of Students, the Clinical Instructor and all Instructors during the Clinical Rotations to the extent required by law.
  - j. The School shall be responsible for planning and implementing the annual education, educational program, including administration, programming, curriculum content, books and materials, faculty appointments, eligibility and admission criteria, Student selection, matriculation, promotion, graduation, Student performance evaluation, Instructor performance evaluation, references and all academic aspects of the Clinical Rotation programs.
4. Responsibilities of the Facility.
- a. The Facility shall designate a Facility employee to serve as its coordinator (the "Facility Coordinator") for the Clinical Rotations and to work directly with the Clinical Instructor and Instructors to plan and coordinate the Clinical Rotations. The Facility may also designate one or more employees to serve as Clinical Instructors.
  - b. The Facility shall provide the Clinical Instructor with copies of the Facility's policies, rules, regulations and procedures that are applicable to Students' and Instructors' participation in the Clinical Rotations.
  - c. The Facility shall provide an orientation to the Clinical Instructor that includes a tour of the Facility and addresses any facilities or procedures of a particular Facility department pertinent to the Clinical Rotations.
  - d. The Facility shall permit Students and Instructors to assist in the provision of nursing or other ancillary health care services to Facility patients, but the Facility may restrict their activities, including any patient care activities, at the Facility.
  - e. The Facility shall provide parking in designated areas for Students and Instructors.

- f. The Facility shall permit the School and its accreditation agencies to visit, tour and inspect the Facility's facilities and records relating to the Clinical Rotations on reasonable notice during the Facility administration's regular business hours, subject to requirements of patient confidentiality, legal compliance requirements of the Facility, and minimizing disruption or interference with Facility operations, including patient care activities.
  - g. The Facility shall make its classrooms, conference rooms and library facilities available to the School for the Clinical Rotations, without charge, subject to availability and Facility policies regarding use of its facilities.
  - h. The Facility shall make available emergency care and treatment to Students and Instructors, as necessary, subject to its usual charges.
5. Conflicts and Removal of Students or Instructors. If a conflict arises between an employee of the Facility, on the one hand, and an Instructor or Student, on the other, the Clinical Instructor and Facility Coordinator shall intervene in an attempt to resolve the matter. The Facility may require that the School immediately remove a Student or Instructor from a Clinical Rotation when the Facility believes that the individual exhibits inappropriate behavior, is disruptive, does not comply with Facility rules or policies, or poses a threat to the health, safety or welfare of a patient, employee or any other person. In addition, upon receipt of the Roster or at any time after a Clinical Rotation begins, the Facility may refuse to allow any Student or Instructor to participate in the Clinical Rotation if the individual has an unfavorable record with the Facility from previous employment, another clinical rotation or any other reason.
6. Representations and Warranties of the School. The School represents and warrants to, and covenants with, the Facility as follows:
- a. Each Student is currently enrolled at the School. Students who are under 18 years of age have obtained written permission of a parent or guardian to participate in the Clinical Rotation; if the Student is an emancipated minor, then the Student has furnished written authorization to participate in the Clinical Rotation.
  - b. Students are required to wear uniforms with name badges issued by the School, be well-groomed and make a neat appearance while at the Facility.
  - c. A Student may perform duties and procedures for which he or she has been prepared academically, but not any others.
  - d. The School shall continuously monitor and evaluate the competence and performance of each Student and shall remove from a Clinical Rotation any Student who is not competent or qualified to participate in the Clinical Rotation.

- e. The Instructors are duly licensed to practice in Oklahoma; the license of each Instructor is unrestricted; and each Instructor must keep his or her license current, in good standing and unrestricted during the entire term of this Agreement.
  - f. The Instructors are experienced, qualified and currently competent to provide the services that are required of them for the Clinical Rotations and any services required of them under this Agreement.
  - g. The School has provided the Clinical Instructor, Instructors and Students with training on the Facility's policies and procedures with respect to protected health information that is necessary and appropriate for them to carry out the activities contemplated by this Agreement as required by applicable provisions of the Health Information Portability and Accountability Act of 1996 and regulations.
  - h. The School has not been excluded, debarred, or otherwise made ineligible to participate in any federal healthcare program as defined in 42 USC § 1320a-7b(f).
  - i. All information that has been furnished to the Facility concerning the School, Students and Instructors is true and correct in all respects.
  - j. All representations and warranties in this Agreement shall remain true and correct during the term of this Agreement. If any of the representations and warranties become inaccurate in any way, the School shall immediately notify the Facility.
7. Employees of the School. Other than any Facility employee designated as an Instructor as permitted in this Agreement, the School, and not the Facility, is the employer of the Instructors and Clinical Instructors. The School shall be responsible for (a) the compensation and benefits payable and made available to the Instructors and Clinical Instructors, and (b) withholding any applicable federal and state taxes and other payroll deductions as required by law.
8. Insurance Coverage.
- a. State-Operated Entity. This provision is applicable to Schools that are owned and operated by the State of Oklahoma. The School represents that it and its faculty are self-insured according to the Oklahoma Governmental Tort Claims Act. The School agrees to furnish verification of professional liability insurance covering the participating Students and Instructors. The Facility shall maintain insurance in amounts sufficient to cover its responsibilities under this Agreement. During the term of this Agreement, the School shall require Students and Instructors to maintain, and each Student and Instructor shall continuously maintain professional liability insurance in the minimum amount of \$1,000,000 per occurrence. Upon request, the School shall arrange for the Students to provide a certificate of insurance to the Facility evidencing such coverage and shall notify the Facility immediately if any adverse change in coverage occurs for any reason.

The policies may not be cancelled or terminated without the School giving the Facility at least 30 days advance notice of cancellation or termination.

- b. Institutions That Are Not State-Operated. This provision is applicable to Schools that are not owned and operated by the State of Oklahoma. During the term of this Agreement, the School shall continuously maintain for itself and for Students and Instructors professional liability insurance in the minimum amount of \$1,000,000 per occurrence and \$3,000,000 in the aggregate, and with such coverages as may be acceptable to the Facility. Upon request, the School shall provide a certificate of insurance to the Facility evidencing such coverage and shall notify the Facility immediately if any adverse change in coverage occurs for any reason. The policy shall provide that it may not be cancelled or terminated without giving the Facility at least 30 days advance notice of cancellation or termination. The Facility shall maintain insurance in amounts sufficient to cover its responsibilities under this Agreement.

9. Family Educational Rights and Privacy Act

Should School provide confidential information to Facility, in paper or electronic form, including "personally identifiable information" from student education records as defined and protected by the Family Educational Rights and Privacy Act (FERPA), 34 CFR §99.3, the Facility certifies that it shall maintain the confidential information, as required by applicable Oklahoma and Federal law and that it shall not redisclose personally identifiable information except as permitted or required by the Agreement, or directed by FERPA or by other applicable laws. The Facility shall develop, implement, maintain and use appropriate security measures to preserve the confidential information.

10. Termination.

- a. Termination for Cause. The Facility may immediately terminate this Agreement for cause upon notice to the School upon the occurrence of any of the following events: (i) the failure of the School to maintain insurance coverage as required by this Agreement; or (ii) the School fails to bar a Student from participating in a Clinical Rotation after the Facility has informed the School to remove a Student for reasons permitted under this Agreement.
- b. Termination for Material Breach. If either party defaults by the failure to comply in all material respects with the terms of this Agreement, the other party may terminate this Agreement by giving at least 30 days prior written notice to the defaulting party, specifying in reasonable detail the nature of the default, unless the defaulting party remedies the default within the 30 day period. This provision shall not constitute an election of remedies by either party, and each party shall have and retain all rights and remedies that may be available at law or in equity in the event of breach or default by the other party.

11. Responsibility for Actions. Each party shall be responsible for its own acts and omission and the acts and omissions of its employees, officers, directors and

affiliates. A party shall not be liable for any claims, demands, actions, costs expenses and liabilities, including reasonable attorneys' fees, which may arise in connection with the failure of the other party or its employees, officers, directors, or agents to perform any of their obligations under this Agreement. If the School is an agency or institution of the State of Oklahoma, the School's liability shall be governed by the Oklahoma Governmental Tort Claims Act.

12. Disclaimer of Intent to Become Partners. The Facility and the School shall not by virtue of this Agreement be deemed to be partners or joint venturers. Neither party shall incur any financial obligation on behalf of the other.

13. Notices. Any and all notices, consents or other communications by one party intended for the other shall be deemed to have been properly given if in writing and personally delivered, transmitted by electronic means, or deposited in the United States first class mails, postpaid, to the addresses or numbers set forth below the signatures of the parties.

14. Confidentiality. The School shall, and the School must require Clinical Instructors, Instructors and Students to, keep confidential and not divulge to anyone else any of the proprietary, confidential information of the Facility, including patient information, unless such information (a) is or becomes generally available to the public other than as a result of disclosure by the School or any of the Students, or (b) is required to be disclosed by law or by a judicial, administrative or regulatory authority. The School, Clinical Instructors, Instructors and Students shall not use such information except as required to provide patient care services in the Clinical Rotations.

15. HIPAA Compliance.

a. The School must, and the School shall require the Clinical Instructors, Instructors and Students to, appropriately safeguard the protected health information of patients, in accordance with applicable provisions of the Health Insurance Portability and Accountability Act of 1996, as it may be amended from time to time ("HIPAA") and applicable law. Instructors and Students may use and disclose protected health information solely for the education and treatment purposes contemplated by this Agreement.

b. With respect to information obtained or received from the Facility, the School shall: (i) not use or further disclose the information other than as permitted or required by this Agreement or as required by law; (ii) use appropriate safeguards to prevent use or disclosure of the information other than as provided for by this Agreement; (iii) report to the Facility any use or disclosure of the information not provided for by this Agreement of which the School becomes aware; and (iv) require that any agents, including a subcontractor, to whom the School provides protected health information received from, or created or received by the School



on behalf of, the Facility agrees to the same restrictions and conditions that apply to the Facility with respect to such information.

16. **Rights in Property.** All supplies, fiscal records, patient charts, patient records, medical records, X-rays, computer-generated reports, pharmaceutical supplies, drugs, drug samples, memoranda, correspondence, instruments, equipment, furnishings, accounts and contracts of the Facility shall remain the sole property of the Facility.
17. **Non-Discrimination.** Except to the extent permitted by law, the Facility, the School, Instructors and Students shall not discriminate on the basis of race, color, creed, sex, age, religion, national origin, disability or veteran's status in the performance of this Agreement. As applicable to the School, the provisions of Executive Order 11246, as amended by EO 11375 and EO 11141 and as supplemented in Department of Labor regulations (41 CFR Part 60 et. Seq.) are incorporated into this Agreement and must be included in any subcontracts awarded involving this Agreement. The School represents that, except as permitted by law, all services are provided without discrimination on the basis of, race, color, creed, sex, age, religion, national origin, disability or veteran's status; that it does not maintain nor provide for its employees any segregated facilities, nor will the School permit its employees to perform their services at any location where segregated facilities are maintained. In addition, the School agrees to comply with Section 504 of the Rehabilitation Act and the Vietnam Era Veteran's Assistance Act of 1974, 38 U.S.C. Section 4212.
18. **Facility Policies and Procedures.** The School shall, and the School must require Instructors and Students to, comply with the policies, rules, and regulations of the Facility as provided to the School by the Facility.
19. **Severability.** The invalidity or unenforceability of any provision of this Agreement shall not affect the validity or enforceability of any other provision.
20. **No Assignment.** Neither party may assign its rights or delegate its duties under this Agreement without the prior written consent of the other.
21. **Binding Effect.** This Agreement shall be binding upon, and shall inure to the benefit of, the parties and their respective legal representatives, successors and permitted assigns.
22. **Governing Law.** This Agreement shall be governed by, and construed in accordance with, the laws of the State of Oklahoma.
23. **Rights Cumulative; No Waiver.** No right or remedy conferred in this Agreement upon or reserved to the Facility is intended to be exclusive of any other right or remedy. Each and every right and remedy shall be cumulative and in addition to any other right or remedy provided in this Agreement. The failure by either the Facility or the School to insist upon the strict observance or performance of any of the provisions of this Agreement or to exercise any right or

remedy shall not impair any such right or remedy or be construed as a waiver or relinquishment with respect to subsequent defaults.

- 24. No Third-Party Beneficiaries. This Agreement is not intended to confer any right or benefit upon, or permit enforcement of any provision by, anyone other than the parties to this Agreement.
- 25. Entire Agreement. This Agreement constitutes the entire understanding and agreement of the parties with respect to its subject matter and cannot be changed or modified except by another agreement in writing signed by the parties.

SCHOOL

Oklahoma City Community College  
7777 S. May Avenue  
Oklahoma City, Oklahoma 73159  
682-1611

FACILITY

Name  
Address  
City, State, Zip  
Phone

BY: \_\_\_\_\_  
\_\_\_\_\_

TITLE: Vice President for Academic Affairs

DATE: \_\_\_\_\_  
\_\_\_\_\_

BY: \_\_\_\_\_  
\_\_\_\_\_ (Signature)

TITLE: \_\_\_\_\_  
\_\_\_\_\_

DATE: \_\_\_\_\_  
\_\_\_\_\_

**OKLAHOMA CITY COMMUNITY COLLEGE**  
**DIVISION of HEALTH PROFESSIONS/PTA PROGRAM**  
**STUDENT ETHICAL PRACTICE AGREEMENT**

The PTA Program within the Division of Health Professions of Oklahoma City Community College is committed to educating competent and responsible health care practitioners. To reach this end, students are required to take part in practical learning experiences in facilities in the community, provide services to clients in all stages of health and illness, and interact with other professionals, students and the general public. In furthering this commitment, the PTA Program and the Division of Health Professions has established this student ethical practice agreement as a guide to appropriate conduct.

I agree to:

1. Observe all health and safety procedures when working with patients/clients and equipment whether in class, clinic, hospital or homes. I shall not endanger the safety, general health and welfare of patients, clients, other students, faculty or staff.
2. Observe all policies and procedures established by facilities to which I am assigned.
3. Respect the patients/clients' rights and confidentiality of patient information regardless of source. I shall not repeat information outside of the classroom, clinic, hospital or facility. I shall make written reports only for class and assigned facility's purpose, and in such reports only the patient's or staff member's initials shall be used.
4. Work in cooperation with and respect for other team members. I shall not interfere with or obstruct the rendering of services provided by others.
5. Protect the property and property rights of the patient/client, colleagues, faculty, staff and facility.
6. Represent my competence accurately and function within its perimeters. I shall not attempt procedures in which I have not demonstrated competency under supervision.
7. Treat the patient/client with consideration and respect.
8. Respect the values and cultural differences of all people and exhibit no discrimination of race, color, ethnic or national origin, sex, sexual orientation, gender identity, gender expression, religion, age, ancestry, disability, genetic information, military status or veteran status.
9. Never make use of any relationships with patients/clients, clinical instructors or faculty and staff for personal gain or accept gifts of substantial value.
10. Demonstrate respect for authority and commitment to learning by modifying behavior in response to feedback.
11. Handle my personal and/or professional problems so they do not interfere with the performance of my duties.
12. Never attend a class or fieldwork assignment under the influence of any substance, legal or illegal that impairs my ability to function and exhibit good judgment.

Revised July 2018

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**OKLAHOMA CITY COMMUNITY COLLEGE DIVISION of HEALTH  
PROFESSIONS/PTA PROGRAM UNACCEPTABLE STUDENT CONDUCT  
DURING PRACTICUM PLACEMENTS**

Assignment of students to practicum facilities is dependent on the willingness of the facility to accept a student at a specified time. Practicum placement is not guaranteed with enrollment. A student is a guest in the facility to which he/she is assigned; consequently, if the student's behavior or performance in any way disrupts patient services at the facility, the preceptor or faculty may immediately terminate the student's placement. The standard agreement between Oklahoma City Community College and the practicum facility states:

"If a conflict arises between an employee of the Facility, on the one hand, and an Instructor or Student, on the other hand, the Clinical Instructor and Facility Coordinator shall intervene in an attempt to resolve the matter. The Facility may require that the School immediately remove a Student or Instructor from a Clinical Rotation when the Facility believes that the individual exhibits inappropriate behavior, is disruptive, does not comply with Facility rules or policies, or poses a threat to the health, safety or welfare of a patient, employee or any other person. In addition, upon receipt of the Roster or at any time after a Clinical Rotation begins, the Facility may refuse to allow any Student or Instructor to participate in the Clinical Rotation if the individual has an unfavorable record with the Facility from previous employment, another clinical rotation or any other reason." Clinical Rotation Agreement Section 5 Conflicts and Removal of Students or Instructors.

One more of the following actions or like actions by a student may be grounds for immediate termination by the Academic Coordinator of Clinical Education and/or Program Director.

- Behavior that creates a threat to the welfare of the patient/client and/or staff
- Behavior that creates a threat to the facility to which the student is assigned.
- Behavior that threatens the continued relationship between the college and the facility.
- Violation of patient confidentiality.
- Failure to adhere to facility policy and/or procedures
- Repeated failure to follow instructions.
- Arguing with the supervisor.
- Use of profane, abusive, or vulgar language.
- Refusal to follow attendance procedures.
- Failure to follow attendance procedures.
- Misrepresentation of personal competency level.
- Failure to alter behavior after constructive feedback from supervisor.

If the student is dismissed or fails the practicum, he/she will be allowed one (1) opportunity to repeat this practicum experience. If the student is dismissed or fails the second (originally scheduled) practicum, he/she will repeat both practicums the following academic year pending facility availability. If the student is dismissed or fails, a re-scheduled make-up practicum, he/she will be terminated from the PTA program.

If the decision of the Program Director is unacceptable to the student, the next step may be in one of two directions. If the action against the student was for academic reasons, the student should schedule a meeting with the Dean of Health Professions to present his/her appeal. If the action was for disciplinary reasons, the student contacts the Vice President for Student Services to initiate the Student Grievance Procedure.

These grievance procedures are outlined in the current edition of the OCCC Student Handbook.  
I acknowledge I have read and agreed to abide by these standards.  
Revised July 2018

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

\_\_\_\_\_  
Date