

Medical Assistant Student Handbook



2025-2026

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Welcome Letter from the Program Director

Welcome to the Medical Assistant program at Edison State Community College. We are pleased you have chosen to pursue your education with us. Our Medical Assistant program has a strong reputation for preparing graduates who are ready to “hit the ground running” and who exemplify professional characteristics. Therefore, our graduates are highly sought for positions in physician offices, healthcare clinics, and other healthcare settings. Your graduation from our Medical Assistant program will prepare you to become a valuable member of the healthcare profession.

This is an exciting beginning for you! We know the path during your time with us will be both challenging and rewarding and we are committed to your success. We also know that students who are most likely to be successful connect with their course faculty, advisors, and classmates so we encourage you to reach out to others on campus who can provide a strong support system and encourage you along the way. Our faculty members bring a wealth of knowledge and experience to the classroom and are eager to help you develop into a top-notch Medical Assistant. We also encourage you to set a goal of completing the MA Certification (CMA, AAMA) upon graduation. This certification will set you apart from others and acknowledge your expertise.

This handbook provides easy access to the Medical Assistant program policies that may affect you while in the program. I encourage you to keep it close at hand and become familiar with its contents.

Best wishes for a rewarding experience during your time with us. We will be there cheering with you when you walk across stage at commencement and get your first Medical Assistant job!

Sincerely,

Yvonne Koors, MHA, B.S., RMS [AMT]

Yvonne Koors, MHA, B.S., RMA
(AMT) MED Program
Director/Assistant Professor

EDISON STATE COMMUNITY COLLEGE

Medical Assistant Program Handbook 2025-2026

A. PROGRAM GOALS AND OUTCOMES

The mission of the Medical Assistant program at Edison State Community College is to prepare competent entry-level medical assistants in the cognitive (knowledge), psychomotor (skills) and affective (behavior) learning domains to enter the profession.

The following program outcomes are met by the Medical Assistant curriculum which utilizes all three aforementioned learning domains and ultimately fulfills the primary goal.

PROGRAM OUTCOMES:

- 1.** Demonstrate professionalism in regard to ethical and responsible behavior.
- 2.** Demonstrate effective interpersonal skills with patients, physicians, and co-workers.
- 3.** Demonstrate competent written and medical terminology skills.
- 4.** Apply administrative policies and procedures effectively in the performance of duties.
- 5.** Apply clinical policies and procedures effectively in the performance of duties.
- 6.** Apply ethical and legal policies and procedures in the performance of duties.
- 7.** Adapt methods and techniques to the individual needs or capabilities of patients.
- 8.** Apply skills, attitudes, and dispositions to reflect Edison State's Academic Core Values.

A. POLICY STATEMENTS

The following are policies of the Edison State Community College (ESCC) Medical Assistant (MED) program. Students in the Medical Assistant program shall abide by these policies as well as those of affiliating agencies during internship. It is the student's responsibility to know affiliating agency policies. Any changes will be posted and reviewed with each class.

B. GENERAL

1. Accreditation

Edison State Community College is accredited by the Higher Learning Commission .

The **Medical Assistant Certificate** is accredited by the [Commission on Accreditation of Allied Health Education Programs](http://www.caahep.org) (www.caahep.org | Address: 9355 113th Street N, #7709, Seminole, FL 33775 | Phone: 727.210.2350) upon the recommendation of the [Medical Assisting Education Review Board](#) (MAERB) (Address: 2339 N California Ave, #47138, Chicago, IL 60647 | Phone: 312.392.0155). Continuing accreditation awarded in 2025.

2. Advisory Committee

Edison State Community College's Medical Assistant program strives to successfully serve its communities of interest. To do so, an advisory committee meets annually to discuss important points of the program, review curriculum, and get feedback from local employers, graduates, students, and associated professionals.

3. Credits (Transfer and Experiential Learning)

To receive credit in Medical Assistant courses from other institutions, the grade received in the transferred course must be a "C" or better and from a Medical Assistant program accredited by CAAHEP or ABHES. Please refer to the college catalog for complete information pertaining to credits obtained in this manner and for experiential learning. The final decision regarding transfer credits, etc., is at the discretion of the Program Director.

4. Technical Standards

There are no technical standards required for the Medical Assisting students.

5. Student Fees

All payments and fees are to be paid prior to graduation. If not fully paid by graduation, the student cannot receive his/her certificate and/or degree.

6. Class Cancellation

When college classes are canceled because of weather or other emergencies, all Medical Assistant classes will be canceled. Students need to sign up for Edison State Alerts at: [Edison State Alerts - Edison State Community College](#) This information is no longer advertised on TV/Radio.

7. Grievances

Policies are in place to help the student deal with concerns that may arise. For a question about academic advising, the student should seek the assistance of his or her assigned faculty advisor (see Academic Advising). A concern related to a class should be discussed with the instructor of that class.

The student who remains unsatisfied after taking a concern to the faculty advisor and class instructor should see the “Student Handbook” at [Edison State Student Handbook](#) for information. There is a grievance procedure and form at <https://www.edisonohio.edu/Student-Complaint-Form-Process/>

8. Grading

Refer to course syllabus for specific information about grading.

C. ADMISSION/REQUIREMENTS

1. Admission

To be admitted to the Medical Assistant program at Edison State Community College a student shall apply to Edison State Community College and pay the application fee, meet with an Advising Resource Center (ARC) advisor, take placement tests for math, reading and writing, and keyboarding, then register for courses with an advisor. Students need a minimum GPA of 2.0 on a 4.0 scale as well as a grade of “C” or better in MTH 093D or higher for entry into the MED clinical course sequence. Students also must have satisfactory assessment scores in reading and writing to be ready to take ENG 121S (Composition 1), or successfully complete ENG 091D (Basic Writing) and ENG 093D (College Preparatory Reading). Departmental permission from the Program Coordinator is required to register for MED 120S.

2. Academic Advising

Each semester students will meet with their assigned academic advisor (Medical Assistant Coordinator or MED faculty member) to assess the courses to be registered for during the next registration period.

Students should have declared Medical Assistant as their major no later than MED 120S. Students needing to do so may meet with their academic advisor to obtain the "Declaration of Major/Change of Major" form.

3. Retention and Progression

To remain and progress in the Medical Assistant program, a student must:

Comply with college policies on academic standing and graduation requirements;

- a. Furnish medical and immunization records, renewed annually, as required;
- b. Maintain professional liability insurance (furnished by college);
- c. Maintain no less than a "C" in each MED course, pass all MED competencies with an 80% or better;
- d. MAINTAIN THE SEQUENCE OF COURSES as listed for the Medical Assistant program. STUDENTS CANNOT TAKE MORE THAN ONE SEMESTER OFF BETWEEN MED COURSES.
- e. Departmental permission from the Program Coordinator is required to repeat a course in the event that the student either fails or drops the course.
- f. If the student either fails or drops any MED course more than once, that student will be removed from the program.
- g. Students must remain in cohort once they start the MED sequence (i.e., if you start in days for MED 120S, you will remain in days for MED 150S/MED220S).
- h. Each student will be required to volunteer time for MED Program/College events during MED 120S/MED150S/MED220S. The student will be required to volunteer for a minimum of one event in the fall semester and one event in the spring semester.

A student may be dismissed from the Medical Assistant program as a result of failing to maintain any one or more of the following:

- a. Satisfactory criminal background check
- b. A complete health record
- c. A grade of at least "C", satisfactory progress, in each MED course
- d. Satisfactory completion of each administrative and clinical competency
- e. An overall 2.0 GPA
- f. Safe clinical practice

4. Competencies

100% of the competencies required in the MED courses must be passed with a grade of 80% or better.

Achievement of the competencies" means that each student has successfully achieved 100% of the MAERB Core Curriculum psychomotor (skills) and affective (behavior) competencies taught within this course. Cognitive (knowledge) Core Curriculum domains

are assessed by varying modalities such as, but not limited to, weekly quizzes, short answer questions, & discussion forums. The objective of the cognitive domains is to assess the students' level of critical thinking skills that will prepare them for their field of study as an entry-level Medical Assistant. The student will have three (3) attempts to pass each MED competency. If a student fails a competency in his/her first attempt, the skills will be practiced and reassessed at the next class meeting, or as determined by the instructor. A list of CAAHEP domains that are assessed in this course are listed below.

Students who are unable to pass a MED course competency after the third attempt will receive a grade of "F" and will be required to take the course again to receive further training and practice. Students must receive departmental permission from the Program Coordinator in order to repeat the course (see D.3.f., above).

All competencies must be successfully completed for a specific MED course by the conclusion of that course term unless prior arrangements have been made with the instructor.

5. Health Records

Record of a medical exam and all other completed health records must be on file in the Health Sciences Office upon entry into the MED 150S and/or MED 220S clinical courses of the Medical Assistant program. Forms will be given to students during the MED 120S course to allow ample time to complete these requirements.

The forms include: Physical/Immunization Form - appropriate physical status, proof and documentation of: MMR immunization/titer; Tdap or Td within last 10 years; Hepatitis B vaccine series or signed declination form (the first immunization is required upon entry and the series of three (3) vaccines must be completed within six months); varicella series of two (2) vaccines, or physician documentation of chicken pox, or blood titer to show immunity; and tuberculin screen PPD (2-step) or negative chest X-ray. Some internship sites may require students to have the flu vaccine. Students must comply with the internship requirements in order to be eligible and successfully complete the MA program. Students whose health records are incomplete as required will be administratively dropped from the Medical Assistant program on their first day of MED 150S and/or MED 220S.

6. CPR and First Aid Requirements

Documentation for BLS for Healthcare Professionals and First Aid must be on file prior to the first day of MED 220S. Certification is to be obtained through the American Heart Association and all courses are to be completed in person (online certification is not acceptable.)

7. Criminal Record Background Check

Medical Assistant students provide direct care to young children and older adults in a variety of settings. The Ohio Revised Code requires Criminal Record Background checks

of all applicants under final consideration for employment in settings that provide care for these age groups. Students of the Medical Assistant program will participate in the Bureau of Criminal Investigation background and FBI check during MED 120S. Documentation of the results of the background check must be in the student's health records file prior to the first day of internship, MED 291L. The fee for the background check is incorporated into the lab fee for MED 120S. If time lapses, for whatever reason, between the background check and internship, the student will be required to repeat the background check at the student's expense prior to being admitted to internship.

Students who are convicted of, plead guilty to, or have a judicial finding of guilt for any crime subsequent to enrollment should immediately notify the Health Sciences Office in order to determine whether such action will negatively impact their ability to complete the program.

9. Health Insurance

Proof of health insurance must be on file at Edison State prior for placement at certain internship sites. If necessary, students must provide their own health care insurance. Edison State Community College offers access to health insurance at [Student Health Services | Edison State Community College](#). The college assumes no responsibility for student health care expenses, including follow-up care required if a student is injured during clinical course procedures.

While internship facilities will provide emergency care for the student when necessary, the student is responsible for payment of care provided and any transportation required. Students are not insured by the Workers' Compensation Act.

10. Liability Insurance

All students are required to have liability insurance before performing invasive procedures. The coverage is provided by Edison State, and payment for coverage is included in the MED 150S course lab fee. Liability insurance provides protection to the student in the event of malpractice initiated by a client or another student. This liability policy provides \$1,000,000 per claim (\$500 deductible).

11. Drug Testing

In compliance with the "Drug Free Workplace," several internship affiliates are implementing a drug screen profile as a part of the physical examination of all new employees. It is possible that a student may be required to submit to a drug screen as a prerequisite for participation in the internship component of the Edison State Community College Medical Assistant program.

The Drug Screen Policy is included in the Appendix of this handbook.

B. ATTENDANCE/CONDUCT

1. Attendance

Students are expected to be present in Medical Assistant classes and clinical labs and **to be prepared to actively participate in their own learning**. Each student is responsible for meeting course objectives in a satisfactory manner.

Attendance in Medical Assistant classes is necessary to achieve the objectives for learning.

Students who miss more than three (3) class periods for MED classes meeting twice a week will be administratively dropped from the course and required to repeat the course to remain in the program. For students in MED classes meeting once a week, missing more than two (2) classes will result in being administratively dropped from the course and being required to repeat the course to remain in the program. Attendance to seminar (MED 291R) is mandatory. Exceptions may be granted per instructor discretion for extenuating circumstances. Excessive absences from seminar can result in failure of the course. Please refer to MED 291L syllabi for attendance policy. If a student is unable to report to class due to an unforeseen emergency, he/she should contact the instructor as soon as possible. Refer to specific course syllabus for instructor's policy on make-up work. Documentation for the reason of absence should be provided if appropriate.

Classroom/Lab - If the student is unable to attend class on the day of an announced test or competency due to an emergency situation, he/she is responsible for calling the instructor prior to the class hour.

Internship Experience - If a severe illness/emergency prevents the student from attending an internship experience as scheduled, it is his/her responsibility to leave a message for the internship facility contact and communicate the absence to the internship instructor. Each student is responsible for meeting course objectives for internship in a satisfactory manner.

Evaluation of a student's performance in the internship setting is made by assessing whether or not the student meets the objectives/outcome criteria for the course as well as each entry-level clinical, administrative and general competency as outlined on the internship skills checklist and final evaluation.

Additionally, the instructor may require a student to leave a campus lab or internship experience if the student is unprepared, if the student has health problems which may jeopardize the health of others, or if the student's behavior is unacceptable or inappropriate. The circumstances described constitute an absence. A physician's permission will be required to return in situations which might alter the student's ability to safely achieve the campus lab or internship experience objectives.

2. Communication

The student should regularly check Blackboard and Edison State email. The Program Coordinator and instructors may choose to post important information on the individual course website in Blackboard. It is the student's responsibility to stay in contact with MED staff/faculty and to stay up to date with communication regarding the Medical Assistant program.

3. Conduct

A high level of professional conduct is a must in the class and in the internship setting.

A student shall accurately report any errors to the clinical preceptor and/or practitioner. A student shall not falsify any patient record or any other document prepared or used in the course of, or in conjunction with, Medical Assistant practice. A student shall implement measures to promote a safe environment for each patient. At all times when a student is providing direct care to a patient, the student shall provide privacy during examination or treatment, and treat each patient with courtesy, respect, and with full recognition of the patient's dignity and individuality. At all times, a student will hold in strictest confidence any and all information concerning a patient and his/her family and will follow HIPAA (Health Information Portability and Accountability Act) guidelines to secure patient information. A student shall not engage in behavior that causes or may cause physical, verbal, mental, or emotional abuse to a patient, or behavior toward a patient that may reasonably be interpreted as physical, verbal, mental, or emotional abuse.

4. Dress Code & Hygiene

Medical Assistants are seen as professionals. The students must maintain a high standard of personal hygiene and grooming. Practicing good personal hygiene helps one look and feel one's best. It also affects how one feels about one's self and how peers and patients feel about the student. Personal hygiene involves daily bathing and grooming, eating a balanced diet and getting enough rest and exercise.

While in and during MED 120S, MED 150S, MED 220S, and MED 291L/R classes and at the internship site, the following rules apply:

- a. Fingernails should be kept trimmed to ¼ inch or shorter. They should be clean, and nail polish, if used, should be clear or a pale, natural color. Artificial nails cannot be worn.
- b. Jewelry - No long necklaces; finger rings kept to a minimum; one pair of small, non- dangling earrings.
- c. Hair should be neat and well contained (shoulder-length or longer hair pulled back). No feathers, color strands, tinsel, etc.
- d. Cosmetics should be used in moderation.
- e. Colognes and perfumes are not acceptable in the internship setting.
- f. No visible tattoos or other piercings are permitted.
- g. No gum.

Black scrub pants and Teal scrub shirt will be worn. They must be clean, neat and modest—midriff covered. If T-shirts or turtlenecks are worn under scrub top, the color must be all white with no designs. White, full-coverage shoes will be worn. Uniform scrubs are required and can be purchased at the Edison State bookstore. One uniform is required; two uniforms are recommended. You will need to purchase a white lab coat for internship which is also available through the bookstore.

C. EXPOSURE

OCCUPATIONAL RISKS

Medical Assisting is a profession with many rewards, as practitioners can perform both administrative and clinical services, filling several roles in a variety of healthcare environments. The Bureau of Labor Statistics clearly outlines that it is a growth field, with an anticipated 18% growth from 2020 to 2030.

Medical Assistants work directly with providers and patients, with the goal of providing healthcare and ensuring patient safety. It is a position with a great deal of responsibility.

As with any healthcare position, there are certain occupational risks that come into play with being a medical assistant, and those hazards include the following:

- Exposure to infectious diseases
- Sharps injuries
- Bloodborne pathogens and biological hazards
- Chemical and drug exposure
- Ergonomic hazards from lifting, sitting, and repetitive tasks
- Latex allergies
- Stress

At the same time, there are protections set up with the Occupational Safety and Health Act (OSHA), and those protections are particularly important within a healthcare environment. OSHA has a series of standards that protect the safety of healthcare workers and patients. (See ESCC Exposure Plan)

Accredited medical assisting programs are required to teach students about the hazards that they face on the job and the protocols that can be put into place to ensure a workplace culture that prioritizes safety.

A pregnant student should realize that the fetus may be exposed to risks in a clinical facility. These risks should be discussed with the student's physician. A note from the physician clearing the pregnant student to participate in clinical experiences needs to be provided to the instructor/program. The Medical Assistant faculty, especially the clinical instructor, should be notified as soon as pregnancy is suspected.

1. Accidental Exposure

A Lab Safety Agreement is signed by each student before they participate in Medical Assistant clinical or internship courses. Refer to lab safety agreement at the end of this handbook.

2. Unsafe Practices

Unsafe practices include, **but are not limited to** improper patient identification; mislabeling of tubes; carelessness with medications or test procedures including documentation, performance and handling of invasive procedures and equipment; and failure to practice standard precautions, accurately performing dosage calculations of medications, etc.

If a student displays unsafe practices in the classroom or the internship which may potentially harm another person, the student will be counseled and an action plan for remediation will be developed. If unsafe practices are observed in class or reported by the internship clinical preceptor two times while the student is in the program, the student will be removed from the program and will receive a grade of “F” for the currently enrolled course.

3. Lab Safety Agreements (Blood-Borne Pathogens)

A lab safety agreement will be signed in MED 120S. Agreements will be kept in each student’s file.

4. Needle Sticks (see “Accidental Exposure”)

5. Emergencies

While on campus: the Student Health Nurse is available Mon-Thurs 9:00 – 3:30 for minor illnesses and injuries. If the nurse is unavailable or the situation warrants immediate attention, call 911. While students are out at internships, they will follow the safety standards and emergency protocols of the facility.

Students are expected to read the Emergency Procedures Manual available online at [Emergency Procedures Manual](#).

D. INTERNSHIP

1. Internship

To be eligible to participate in the required Medical Assistant Internship & Seminar courses (MED 291L and MED 291R) the student must successfully complete each MED course with a grade of “C” or better. Students are required to sit for the CM A exam to pass the Medical Assisting Seminar course. The initial exam cost will come from the course fees. In addition, each competency required in the MED courses must be passed with a grade of 80% or better and **all** critical steps of the MED competencies must be completed successfully. For more information on competencies and their grading refer to the “Competencies” section. The students wishing to intern are also required to attend a mandatory internship orientation that is held prior to the semester the internship starts. (i.e., The orientation for summer internship is held in the spring semester prior to the start of internship.) Attendance at this orientation is mandatory. If you do not attend the orientation, you are ineligible to intern.

ALL students, whether you are day or evening cohort, are expected to attend orientation

when it is offered. Students must have dependable/reliable transportation to be eligible for internship.

The internship and internship seminar components of the program **must** be taken immediately after the completion of the MED course sequence.

The numbers of internship sites are limited and vary from semester to semester. It is possible that all students that qualify for internship may not be placed into an internship site that particular semester. The student's GPA, grades in clinical courses and instructor recommendations will be used as indicators for the order students are placed into sites. Students are required to complete a minimum of 160 hours **and** all specific MED 291L and MED 291R course requirements. All internships are supervised by clinical staff. Students are not paid by the internship site. If the student is employed, then service work must be kept separate from the internship time. Students should not be used as unpaid labor.

Assignment to an internship site is final and may not be changed by the student. Failure to accept an internship site placement will result in removal from the Medical Assistant program.

If a student fails at the assigned internship, that student may be removed from the program. The Program Coordinator will consider placement at a second internship site on a case-by-case basis. Placement at a second site is not guaranteed. If the student is unable to be placed at a second site, the student shall receive a grade of "F" and be removed from the program.

To be considered for re-entry into the course sequence at the MED 291L and MED 291R level, the Edison State student should submit a written request that includes reasons for withdrawal or failure and identifies a remediation plan for success, no later than 6 weeks prior to the start of the semester the student wishes to re-enter. The student must pass both a written exam (minimum of 70%) and a lab skills practical (pass/fail). In all circumstances of re-entry, the student's medical records and background check will be reviewed and must be updated, if necessary, to re-enter the program. The Medical Assistant faculty will review the student's request and the decision will be communicated to the student by the Program Director. Placement in an internship site is based on availability and is not guaranteed.

The Medical Assistant program requires all students to sit for the CMA exam to pass the seminar course. This exam is included in MED 291R (Internship Seminar). The fee for this exam is included in the lab fee for MED 291R as well as the fee for the AAMA CMA certification exam. ALL graduates of the Medical Assistant program are expected to sit for the AAMA CMA certification exam when eligible.

NO cell phone use during internship hours. Your phone should not be on your person while you are interning. Please keep it with your belongings and have it on silent.

You may check your phone during breaks only.

Facility name: Edison State Community College
Revised Date: January 1, 2023

EDISON STATE COMMUNITY COLLEGE EXPOSURE CONTROL PLAN

A. *Exposure Determination*

The Employer has determined common job classifications/students that may be expected to incur occupational exposures to blood or other potentially infectious materials. This exposure determination is made without regard to use of Personal Protective Equipment (PPE).

The following job classifications may expect the possibility to incur occupational exposures to blood or other potentially infectious materials.

- Instructors of MED, PLB, MLT clinical courses
- Environmental service technicians assigned to clean room 104 (clinical lab).

The following students may expect the possibility to incur exposures to blood.

- Students taking courses in the allied health programs

The following is a list of job classifications in which some employees may have occupational exposures to blood or OPIM:

- Instructor of clinical courses in MED.
 - Task: Training invasive procedures, classroom Labs and clean-up.
- Environmental Services Technician
 - Task: Cleaning room 104

The following students may have exposure to blood.

- Students taking courses in the Allied Health Programs

C. *Compliance Methods*

1. Standard Precautions

This organization embraces “standard precautions,” which is a method of infection control that requires the employee/student to assume that all human blood and specified body fluids are infected with blood borne pathogens. Where it is difficult or impossible to identify body fluids, all are considered to be potentially infectious.

2. Engineering Controls and Work Practices

All sharps (needles, tubes, slides) shall be disposed into puncture-proof, biohazard labeled, sharps containers provided in each laboratory setting. Place fully closed sharps containers into the main biohazard box. Do not throw any tubes directly into the main biohazard box.

The following engineering and work practice controls will be used by employees/students to eliminate or minimize occupational exposures at this facility.

- a. Engineering controls
 - i. Safety needles, transfer devices, plexiglass, shields, eye wash stations, Sharps containers.
- b. Work practice controls
 - i. Wash hands with soap and water before and after practicing clinical procedure.
 - ii. Flush eyes and mucous membranes with water immediately after any exposure
 - iii. Eating, drinking, and applying cosmetics is not allowed in the lab.
 - iv. Dispose of sharps into sharps containers. When sharps containers are nearly full close the lid securely and place the entire sharps container in the main biohazard box.

3. Personal Protective Equipment (PPE)

Gloves, lab coats, face shields/mask/goggles, heavy duty gloves

- a. Body protections: (List items and when used.) MED – gloves
MLT – gloves, lab coat
PLB - gloves
- b. Gloves, masks, goggles or face shields and lab coat if splash is likely to occur.
- c. Special PPE:
Heavy duty gloves if cleaning up a spill containing glass.
- d. The instructor is responsible for ensuring and issuing appropriate, readily accessible PPE to students. Non-latex gloves shall be readily accessible to employees/students. Students are responsible for identifying a need for necessary PPE.
- e. All PPE will be removed prior to leaving the work area/lab.
- f. All PPE will be disposed of by the employer at no cost to the employee.
- g. PPE, when removed, will be placed in the designated area for disposal.

Housekeeping

ESCC spaces will be cleaned and decontaminated according to the following schedule:

Area	Schedule	Cleaner
Lab/countertops	After each class	Students/instructor
Desks in lab area	After each class	Students/instructor
Floors/sinks	As scheduled by Envir. Services	Facilities
Athletic Trainer	After use	Athletic Trainer
Common Areas	As needed	Facilities

ESCC will use an approved disinfectant to clean surfaces. An appropriate disinfectant is defined as an EPA-listed tuberculocidal germicide. Broken glassware shall not be picked up directly with the hands. It shall be cleaned up using mechanical means such as a brush and dust pan, tongs, or forceps.

LAUNDRY

Blood-soaked or significantly stained laundry (by blood or OPIM) should be neutralized in a minimum 10% bleach or a peroxide solution, put in a plastic biohazard bag, and appropriately handled.

Staff responsible for handling/laundering contaminated laundry are required to participate in the ESCC Exposure Control Program. This includes training (initial and annual refresher), as well as immunizations and other protective measures.

Appropriate PPE is to be worn when handling and/or sorting contaminated laundry. At a minimum this will include wearing gloves and lab coat if washing heavily soiled garments. Contaminated laundry is to be handled as little as possible, with minimal agitation. Contaminated laundry shall be at the location in leak-proof, labeled, or color-coded containers where it was used and shall not be sorted or rinsed in the location of use. Red bags or bags marked with the biohazard symbol are to be used for this purpose. Students are to notify the department lead if they discover regulated waste containers, refrigerators containing blood or OPIM, contaminated equipment, etc., without proper labels.

LABELS

Warning labels will be affixed to containers of regulated waste; refrigerators and freezers containing blood or OPIM; and other containers used to store, transport, or ship blood or OPIM. Individual containers of blood or OPIM that are placed in a labeled container during storage, transport, shipment, and disposal are exempt from these labeling requirements.

Staff is to notify the department lead if they discover regulated waste containers, refrigerators containing blood or OPIM, contaminated equipment, etc., without proper labels. Students are to notify the department lead if they discover regulated waste containers, refrigerators containing blood or OPIM, contaminated equipment, etc., without proper labels.

F. Hepatitis B (HepB) Vaccination

The HepB vaccination is recommended for the faculty and staff listed in Table 1, and students before practicing invasive procedures in the health science programs. The HepB vaccination series is available at no cost for faculty and staff at the time of hire and within 10 days of initial assignment to all employees working with, or may come in contact with, human blood & body fluids, human cell lines & human tissues, or other OPIM. Contracted staff and students are responsible for costs associated with prophylaxis. Prophylaxis is the prevention of or protective treatment for a disease. ESCC's vaccination program consists of a series of three intramuscular vaccinations administered on days zero, 1 month & 6 months.

The vaccination is encouraged unless 1) documentation exists that the employee has previously received the series; 2) antibody testing reveals that the employee is immune, or 3) medical evaluation shows that vaccination is contraindicated.

The HepB vaccine will be provided at Occupational Health at UVMC Outpatient Center South to employees who choose to have it. If an employee declines the HepB vaccine, a declination form must be signed and kept in the employee file in Human Resources. Faculty and staff have the right to change their mind at any time. HepB vaccination records are kept in the employee's file.

G. Post Exposure Evaluation and Follow-up

Exposure Incident means a specific eye, mouth, other mucous membranes, non-intact skin, or parenteral contact with blood or other potentially infectious materials that results from the performance of an employee's duties.

Parenteral means piercing mucous membranes or the skin barrier through such events as needle sticks, human bites, cuts, and abrasions.

FACULTY & STAFF

If ESCC faculty or staff incur an exposure while at an ESCC campus while performing duties within their ESCC role, they should follow the Employee Resource Manual.

If ESCC faculty or staff incur an exposure at an outside facility while performing duties within their ESCC role, they should follow both Employee Resource Manual as well as the facilities policy where the exposure occurred.

All exposure incidents shall be reported to the DPS at (937) 778-7820 as soon after the incident as practical. ESCC faculty and staff are encouraged to speak with their health care provider about any additional follow-up post-exposure prophylaxis that may be recommended.

An immediately available confidential medical evaluation and follow-up will be conducted. Following initial first aid (clean the wound, flush eyes or other mucous membranes, etc.), the following activities will be performed:

- ESCC faculty and staff who incur an exposure incident will submit to a post-exposure evaluation. ESCC will cover the cost of required testing and follow-up for faculty and staff.
- • During normal business hours, all faculty and staff post-exposure evaluations will be conducted at Occupational Health at UVMC Outpatient Center South.
- • After normal business hours, all faculty and staff post-exposure evaluations will be conducted at the closest most accessible medical facility that provides these services.
- • If the faculty or staff person needs immediate medical attention, they should be taken to the closest medical facility.
- • Post-exposure prophylaxis for human immunodeficiency virus (HIV) and hepatitis B virus

(HBV), when medically indicated, will be offered to the exposed individual according to the current recommendations of the United States Public Health Service. ESCC will cover the cost of prophylaxis for faculty and staff.

STUDENTS

If an ESCC student incurs an exposure while at an ESCC campus, they should follow their program's policy.

If an ESCC student incurs an exposure at an outside facility while performing duties within their ESCC role, they should follow both their program's policy as well as the facility's policy where the exposure occurred.

Student exposure incidents shall be reported to their instructor who will notify DPS at (937) 778-7820 as soon after the incident as practical. ESCC students are encouraged to speak with their health care provider about any additional follow-up post-exposure prophylaxis that may be recommended.

Following initial first aid (clean the wound, flush eyes or other mucous membranes, etc.), the following activities will be performed:

- • ESCC students who incur an exposure incident should submit to a post-exposure evaluation and follow-up. The student is responsible for the costs associated with the medical evaluation.
- • If the student needs immediate medical attention, they should be taken to the closest medical facility.
- • Post-exposure prophylaxis for human immunodeficiency virus (HIV) and hepatitis B virus (HBV), when medically indicated, is the current recommendations of the United States Public Health Service. The student is responsible for costs associated with prophylaxis.

FACULTY/STAFF & STUDENTS

If possible, identify and document the source individual of the blood/OPIM samples

(unless ESCC can establish that identification is infeasible or prohibited by state or local law).

- • Obtain consent and make arrangements to have the source individual tested as soon as practical to determine HBV and HIV infectivity and document that the source individual's test results were conveyed to their health care provider.
- • If the source individual is unwilling to give a sample, submit a complaint to compel testing under ORC § 3701.247.
- • If the source individual is already known to be HIV and/or HBV positive, new testing need not be performed.
- Assure that the exposed individual is provided with the source individual's test results and with information about applicable disclosure laws and regulations concerning the identity and infectious status of the source individual (e.g., laws protecting confidentiality).
- • After obtaining consent, collect exposed individual blood as soon as feasible after the exposure incident, and test blood for HBV and HIV serological status.
- • ESCC faculty and staff will complete the necessary paperwork as provided by DPS. During the DPS investigation, all necessary documentation will be maintained within their office.
- • If a student has an exposure, it will also be reported to the instructor who will notify DPS for the student to complete the necessary paperwork. Documentation will be maintained within their office until the conclusion of the event.
- • Faculty, staff, and students shall provide the DPS with a written opinion/evaluation from the treating medical professional that contains only the following information:
 - o Whether the affected person has been informed of the results of the evaluation.
 - o Whether the affected person has been notified of any medical conditions resulting from exposure to blood or other potentially infectious materials which require further evaluation or treatment.
 - o Documentation will be maintained within their office until the conclusion of the event.
- After all incident activity:
 - o Faculty and staff documentation will be maintained with Human Resources.
 - o Student documentation will be maintained with the department's APS.

I. Evaluation of Circumstances Surrounding an Exposure Incident

After an exposure incident has an incident-cause-investigation completed by DPS, the BBP Program Coordinator will review the circumstances of all exposure incidents to determine:

- • Engineering controls in use at the time.
- • Work practices followed.
- • Description of the device being used (including type and brand).
- • Protective equipment or clothing that was used at the time of the exposure incident (gloves,

eye shields, etc.).

- Location of the incident (classroom, common area, clinical site, etc.).
- The procedure being performed when the incident occurred.
- Employee's training.
- Employee's HepB vaccination status.

The final results will be forwarded to the Campus Safety Advisory Committee or the appropriate sub-committee. If revisions to this ECP are necessary, the BBP Program Coordinator will ensure that appropriate changes are made. Changes may include an evaluation of safer devices, adding employees to the exposure determination list, or additional information and training for faculty, staff, and students.

J. Training

FACULTY & STAFF

All faculty and staff who have the possibility of occupational exposure to bloodborne pathogens receive initial and annual refresher online training. All faculty and staff who have occupational exposure to bloodborne pathogens receive training on the epidemiology, symptoms, and transmission of bloodborne pathogen diseases.

ESCC shall provide additional training when changes such as modification of tasks or procedures or institution of new tasks or procedures affect the employee's occupational exposure. The additional training may be limited to addressing the new tasks or procedures. The training program will be tailored to the educational level and language of the faculty and staff. It will be offered during normal work/class times.

The training program covers, at a minimum, the following elements:

- An accessible copy of the regulatory text of this standard and an explanation of its contents.
- A general explanation of the epidemiology and symptoms of bloodborne diseases.
- An explanation of the modes of transmission of bloodborne pathogens.
- An explanation of the ESCC exposure control plan and how the employee can obtain a copy of the written plan.
- An explanation of the appropriate methods to recognize tasks and other activities that may involve exposure to blood and OPIM, including what constitutes an exposure incident.
- An explanation of the use and limitations of methods that will prevent or reduce exposure including appropriate engineering controls, work practices, and personal protective equipment.
- An explanation of the types, use, location, removal, handling, decontamination, and disposal of PPE.
- An explanation of the basis for PPE selection.

- • Information on the HepB vaccine, including information on its efficacy, safety, method of administration, the benefits of being vaccinated, and that the vaccine and vaccination will be offered free of charge.
- • Information on the appropriate actions to take and persons to contact in an emergency involving blood or OPIM.
- • An explanation of the procedure to follow if an exposure incident occurs, including the method of reporting the incident and the medical follow-up that will be made available.
- • Information on the post-exposure evaluation and follow-up that the employer is required to provide for the employee following an exposure incident.
- • An explanation of the signs and labels and/or color coding required by the standard and used at this facility.

The person conducting the training shall be knowledgeable in the subject matter covered by the elements contained in the training program as it relates to the workplace that the training will address.

Human Resources will ensure that faculty and staff are trained before initial assignment to tasks in which exposure may occur. Department heads will ensure that their staff is trained before initial assignment to tasks in which exposure may occur.

STUDENTS

All students who have the possibility of occupational exposure to bloodborne pathogens receive initial and annual refresher online training. Students who have the possibility of occupational exposure to bloodborne pathogens receive training prior to their first laboratory/clinical session by their area of discipline's faculty. All students who have occupational exposure to bloodborne pathogens receive training on the epidemiology, symptoms, and transmission of bloodborne pathogen diseases.

ESCC shall provide additional training when changes such as modification of tasks or procedures or institution of new tasks or procedures affect the student's exposure. The additional training may be limited to addressing the new tasks or procedures. The training program will be tailored to the educational level and language of the students. It will be offered during normal class times.

The training program covers, at a minimum, the following elements:

- • An accessible copy of the regulatory text of this standard and an explanation of its contents.
- • A general explanation of the epidemiology and symptoms of bloodborne diseases.
- • An explanation of the modes of transmission of bloodborne pathogens.
- • An explanation of the ESCC exposure control plan and how the student can obtain a copy of the written plan.
- • An explanation of the appropriate methods to recognize tasks and other activities that may involve exposure to blood and OPIM, including what constitutes an exposure incident.

- • An explanation of the use and limitations of methods that will prevent or reduce exposure including appropriate engineering controls, work practices, and personal protective equipment.
- • An explanation of the types, use, location, removal, handling, decontamination, and disposal of PPE.
- • An explanation of the basis for PPE selection.
- • Information on the HepB vaccine, including information on its efficacy, safety, method of administration, and the benefits of being vaccinated.
- • Information on the appropriate actions to take and persons to contact in an emergency involving blood or OPIM.
- • An explanation of the procedure to follow if an exposure incident occurs, including the method of reporting the incident and the medical follow-up that will be made available.
- • Information on the post-exposure evaluation and follow-up that the student will provide to the college following an exposure incident.
- • An explanation of the signs and labels and/or color coding required by the standard and used at this facility.

The person conducting the training shall be knowledgeable in the subject matter covered by the elements contained in the training program as it relates to the workplace that the training will address.

Academic Program Directors/Coordinators will ensure that students are trained before initial laboratory or clinical sessions.

K. Recordkeeping

TRAINING RECORDS

Training records are completed for all faculty, staff, and students upon completion of training. These documents will be kept following ESCC and department records retention policies. Faculty and staff records are maintained by Human Resources and student records will be maintained following each program's policy. The training records will include:

- • The dates of the training sessions
- • The contents or a summary of the training sessions
- • The names and qualifications of individuals conducting the training
- • The name of all attendees

Employee training records are provided upon request to the employee or the employee's authorized representative in accordance with ESCC's public records policy. Such requests should be addressed to ESCC Human Resources.

Faculty will ensure that Lab Safety Agreements are signed by students in each clinical course and maintained within the program. These documents will be kept following ESCC and department records retention policies.

POST EXPOSURE MEDICAL RECORDS

FACULTY & STAFF

Human Resources is responsible for maintaining the following faculty and staff records:

- Physical form (if applicable)
- Vaccination or waiver records
- TB screen, if needed

Medical records are maintained for all faculty and staff with occupational exposure to BBP in accordance with 29 CFR 1910.1020, "Access to Employee Exposure and Medical Records". Except for active incident activity, these records will be maintained with HR. The BBP Program Coordinator, while there is still active incident activity, is responsible for maintaining the following records:

- • Blood & Body Fluid Exposure Incident Report Form.
- • Sharps Injury Log.
- • Results of examinations, medical testing, and follow-up procedures.

Blood & Body Fluid Exposure Incident Report forms and medical records will be kept for the length of employment plus 30 years. Sharps injury logs will be retained for five years. The Blood & Body Fluid Exposure Incident Report form can be found on the ESCC HR forms link.

At the conclusion of all incident activity:

- • Documentation will be retained by Human Resources.
- • The BBP Program Coordinator will complete and submit to Human Resources the PERRP Sharps Injury Form Needlestick Report (Form SH-12).
- • Human Resources will review and submit to PERRP the Sharps Injury Form Needlestick

Report (Form SH-12).

STUDENTS

The APS for each program is responsible for maintaining the following student records:

- Physical form
- Vaccination or waiver records
- TB screen

Medical records are retained for students with occupational exposure to BBP in accordance with ESCC policies. The BBP Program Coordinator, while there is still active incident activity, is responsible for maintaining the following records:

- • Blood & Body Fluid Exposure Incident Report Form.
- • Sharps Injury Log.
- • Results of examinations, medical testing, and follow-up procedures.

At the conclusion of all incident activity:

- Documentation will be retained by the APS.

As long as the ESCC student is actively working towards a certificate or degree, Blood & Body Fluid Exposure Incident Report forms and medical records will be kept following each department's record retention policy. Sharps injury logs will be retained for five years.

L. Evaluation & Review

The Community Safety Advisory Committee or Subcommittee is responsible for reviewing this plan annually to determine its effectiveness and updating it as needed.

Adopted: 1/1/2023 by: Jim Howell, ESCC BBP Program Coordinator

EDISON STATE COLLEGE HEALTH SCIENCES- LAB SAFETY AGREEMENT

Medical Assistants will comply with the following rules in regard to lab safety in each course. At the time of orientation to the program, students are required to fill out the lab safety agreement. The agreement form will be kept in the student file and retained for five years.

- **No** lab procedures shall be done without an instructor in the room.
- **No** injections or venipuncture shall be done without an instructor actively observing.
- **No** tests or procedures shall be performed by a student who has missed the introductory lecture and instructions until approved by the instructor, and the package insert has been read (if applicable).
- **No** supplies shall leave the building and/or lab room without permission from the instructor.
- **All** instructions for procedures and use of equipment are to be followed precisely.
- **All** equipment is to be properly cleaned and cared for.
- **All** electrical plugs shall be unplugged at the conclusion of each lab day, unless otherwise instructed.
- Appropriate personal protective equipment (PPE) will be utilized during lab activities.
- **Any** and all mishaps, injuries, and/or errors are to be reported to the instructor immediately.

The student shall pursue follow up care outlined in the Accidental Exposure Follow-up Plan and be responsible for payment of such treatment.

Unsafe practices can lead to termination from the program. (See Handbook.)

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Edison State Community College Medical Assistant
Program **Drug Screen Policy**

Education of health profession students at Edison State Community College requires collaboration between the college and clinical agencies. In order to provide quality clinical experiences, many clinical affiliation agreements require drug screen testing.

Additionally, the college shares an obligation with the clinical agency to provide safe patient care and to protect, to the extent reasonably possible, against unsafe care due to a student who is under the influence of illegal drugs or alcohol while in the clinical setting. Therefore, it is the policy of Edison State Community College that students enrolled in the MED program submit to drug testing upon the request of the clinical site.

“Drug test” or “test” means any chemical, biological, or physical instrumental analysis, for the purpose of determining the presence or absence of alcohol, drugs or its metabolites, as well as for substitution, adulteration, or dilution of the sample. Tests are based on urine or breath samples and are conducted by qualified personnel.

Students enrolled in the MED program at Edison State Community College must abide by the program’s drug screen policy and will receive notice of the drug screen policy prior to enrollment in their first MED course. MED students are subject to drug screening as follows:

- As a pre-clinical screening to fulfill contractual obligations with certain clinical agencies.
- For reasonable suspicion testing if the student exhibits behaviors indicative of substance abuse anytime while enrolled in the MED program.

I. PRE-CLINICAL SCREENING

1. Students assigned to certain clinical agencies will be required to complete a drug screen prior to the first clinical assignment as specified by the agency in order to meet contractual agreements.
2. Drug screening will be scheduled by course faculty who will notify students of when to report to Upper Valley Medical Center Occupational Health for the drug screen.
3. The drug screen fee is the responsibility of the student and is to be paid directly to UVMC Occupational Health.
4. Any student failing to report for screening at the designated time must complete testing with UVMC Occupational Health within 24 hours of that date or submit documentation of extenuating circumstances to the Dean of Health Sciences & Technical Education. The Dean of Health Sciences & Technical Education will make a determination as to acceptance of the documentation and approval for rescheduling.

II. REASONABLE SUSPICION SCREENING

1. Students may also be required to submit to reasonable suspicion testing as stipulated in the drug screen policy of the MED program and/or clinical agency while participating in clinical experiences. Reasonable suspicion is defined as but not limited to the following behaviors:

Observable phenomena, such as direct observation of drug use and/or the physical symptoms or manifestations of being under the influence of a drug; such as, but not limited to, unusual, slurred or rapid speech; noticeable change in appearance and hygiene; impaired physical coordination; inappropriate comments, behaviors or responses; trembling hands; persistent diarrhea; flushed face; red eyes; unsteady gait; declining health; irritability; mood swings; isolation; decreased alertness; and/or pupillary changes.

Abnormal conduct or erratic behavior on the clinical unit, absenteeism, tardiness or deterioration in performance;

- a. Evidence of tampering with a drug test;
 - b. Information that the individual has caused or contributed to an incident in the clinical agency;
 - c. Evidence of involvement in the use, possession, sale, solicitation or transfer of drugs while enrolled in the MED program.
 - d. Odor of Alcohol:
2. If a faculty member or clinical agency staff member observes such behavior, the faculty member must dismiss the student from the educational or clinical setting immediately and contact the Dean of Health Sciences & Technical Education who will determine if there is reasonable suspicion to screen the student. If the Dean of Health Sciences & Technical Education is not available the faculty member will contact the Sr. Vice President for Academic Affairs who will determine if there is reasonable suspicion to screen the student. If the decision is made to screen the student, the Dean of Health Sciences & Technical Education or Sr. Vice President for Academic Affairs will direct the faculty member to make arrangements to have the screening performed immediately. The student will be responsible for obtaining transportation to the designated lab for screening; the student will not be allowed to drive to the designated lab. A student's failure to consent to the screening will result in immediate dismissal from the MED programs. Reasonable suspicion testing includes a witnessed urine drug test and/or breath alcohol testing.
 - a. Students will be informed of the screening results by the Dean of Nursing and Health Sciences.
 - b. The drug screen fee will be the responsibility of the college.

III. CONSEQUENCES FOR A CONFIRMED POSITIVE DRUG TEST, REFUSAL TO BE TESTED or DILUTE SPECIMENS CONSIDERED POSITIVE.

Definition of a positive test: A positive drug test is defined as "The presence in the test sample of illegal drugs and/or metabolites, or of prescriptions drugs and metabolites for which the student does not have a current prescription" at levels

exceeding current testing guidelines. A dilute specimen that is positive for drugs is considered to be a positive specimen for those drugs detected. A breath alcohol test result of 0.04 or greater alcohol concentration is considered a positive test.

1. Failure to complete drug screening, a report of 2 dilute specimens, or confirmation of a positive result as specified in sections I and II above will result in immediate dismissal from the MED program and a grade of "F" will be reported for the currently enrolled course. A student dismissed from the program as a result of noncompliance with the drug screen policy may petition for readmission to the program (if academically eligible) after successful completion of a substance abuse treatment program. Documentation of successful completion must be sent directly to the Dean of Health Sciences & Technical Education by the substance abuse program. Results of a drug screen completed one month prior to the petition for readmission must also be received by the Dean of Health Sciences & Technical Education from Upper Valley Medical Center.
2. If a positive drug test result is confirmed, the Dean of Health Sciences & Technical Education will submit a report of the student's violation of Edison State Community College's Student Code of Conduct. To be considered for readmission to the MED program the student must satisfy all corrective actions as specified by the Non-Academic Misconduct Procedure.

IV. STUDENT DRUG SCREEN PROCEDURES

1. Policies and procedures related to drug screen testing at UVMC will be followed which includes submission of a photo ID and social security number at the time of specimen collection.
2. The collector will be a licensed medical professional or technician who has been trained for collection in accordance with chain of custody and control procedures.
3. Urine specimens will be screened for ten (10) classes of drugs as per the standard 10 panel pre-employment test.
4. Drug detection through urine drug testing is related to the quantity of metabolites present in the urine. A dilute specimen is invalid for determining the absence of drugs in a specimen. If the Dean of Health Sciences & Technical Education is notified of a dilute specimen that is negative, the student will be contacted and must repeat the drug screen within a specified timeframe (generally 48 hours) and at his/her own expense. The student will be requested to refrain from drinking excessive amounts of fluid prior to testing. If a second "dilute" is reported, the drug screen will be considered positive.
5. Positive screens will be confirmed by the Medical Review Officer at UVMC.
6. Tests for breath alcohol concentration will be conducted utilizing a National Highway Traffic Safety Administration (NHTSA) approved testing device. If the initial test indicates an alcohol concentration of 0.04 or greater, a second test will be performed to confirm the results of the initial test. The confirmatory test will be observed and performed between fifteen minutes and no more than 30 minutes from the completion of the original test.
7. All drug screen results will be sent to the Dean of Nursing and Health Sciences.

V. CONFIDENTIALITY

The Dean of Health Sciences & Technical Education of the MED Program will receive all test results. Confidentiality of the test results will be maintained with only the Dean of Health Sciences & Technical Education, the MED Academic Project Specialist, and the student having access to the results with the exception of legal actions which require access to test results or upon the request of clinical agencies for the purpose of clinical placement.

VI. CONSENT

Each MED student is required to sign a statement indicating that he or she has received a copy of the drug testing policy and consents to provide urine specimen(s) for the purpose of analysis. If the MED student is under eighteen (18) years of age, the MED student's parent or legal guardian must sign the drug testing consent form in addition to the MED student. The original signed consent form will be maintained in the student's file in the Health Sciences Office.

Institution Departmental Continuity of Operations Plan (COOP)

Department/Office	Medical Assisting		
	Author (Area COOP Coordinator)		Last Revised Date
	Yvonne Koors, MHA, AMT [AMT]		9/12/2023
Head of Operations	Name	Phone Number	Alternate Phone Number
	Bruce Jamison, Director of Public Safety & Security	<u>937.778.7986</u>	
Email address	bjamison@edisonohio.edu		

PURPOSE

This Continuity of Operations Plan (COOP) will document how the office or department will perform essential operations during an emergency situation or long-term disruption, which might last from a few days to several months. The plan will identify mission-critical functions, departmental communication methods, and alternate personnel, systems and locations. Each college division needs a COOP to ensure the college can respond effectively to a variety of situations.

The COOP planning process focuses on two key questions:

- What functions performed by the department are essential or central to operating the college? Such operations might include providing utilities, security services, communication and computing devices, and payroll.
- What resources (staff, stuff and space) are required to continue those essential operations during an emergency or disruption?

A: Planning Framework

Sample Institution has established four priorities for responding to emergencies:

Priority 1: Protect the lives of those who learn, work, and visit **Edison State Community College**.

Priority 2: Protect and preserve college property and the environment. Maintain integrity of facilities. **Maintenance and security**

Priority 3: Restore college operations, activities and services.

Priority 4: If possible, provide assistance to the local community and external agencies.

Planning Scenarios: No long-term emergency or disruption will unfold exactly as planned. However, it may be useful to consider the following possibilities and assumptions when considering your plan:

- What if the disruption lasts for several months? **Edison State Community College will follow local, state, and federal guidelines to ensure the safety of our staff, facility, and student.**
- Can portions or all of the work be accomplished remotely? **Yes**
 - If so, what is needed to support remote work? **IT issued all staff and faculty with laptops and VPN access if a need arises for remote work and teaching.**
- What if classes and public events on campus have been suspended? **Classes will not be suspended. Lab courses will need approval to access the campus if a pandemic should arise and security is called by the instructor upon arrival and departure from campus. Attendance is also taken via blackboard and all illness related to the pandemic are reported to our health team**
- What if a significant percentage of your work force is unavailable during the disruption

(illness, caring for others, inability to come to work or connect remotely, etc.), including department heads, supervisors and essential personnel? **The Dean of Technical and Professional Education and Adjunct Faculty are informed of any need if the Program Director cannot work due to illness and/or caring for others. Adjuncts are able to teach any course in the MA program if an absence occurs. Adjuncts also know what required reporting paperwork is needed in the event of absence.**

- What if your regular supply chain is interrupted for an extended period of time? **Typically, orders are over-forecasted. However, the MA program has worked with other health science departments if we need supplies that are currently allocated. We have also used other vendors when needed that we don't typically use.**
- What if there was a catastrophic loss to building(s) due to fire, flood, etc.?
 - Is there an alternate space on campus that would be appropriate? **The MA program can work with the Nursing and MLT departments to use their clinical rooms in this circumstance.**
 - Is converting to remote work appropriate? **For theory components it would be appropriate but not for labs.**
- What if there was an extended loss of power and/or computing support from IT?
 - Where can you find information if computer systems are down or we suffer a significant data loss? **Student records related to the MA program in files located in the Program Directors office along with hard copy of their competency packets. All required teaching materials are also backed up on a flash drive if there is an outage.**
 - Is there a manual/analog process that can be implemented on a short-term basis? **Student records related to the MA program in files located in the Program Directors office along with hard copy of their competency packets. All required teaching materials are also backed up on a flash drive if there is an outage.**

B: Departmental Continuity of Operations Objectives

Considering the above priorities and assumptions, describe your department's key objectives, functions and

The medical assisting program must have the ability to meet with students in person to perform face-to-face laboratory components during the lab classes at least once a week to ensure success with psychomotor and affective competencies.

C: Emergency Communication Systems

College Communications

When college classes are canceled because of weather or other emergencies, all Medical Assistant classes will be canceled. Students need to sign up for Edison State Alerts at: [Edison State Alerts - Edison State Community College](#) This information is no longer advertised on TV/Radio. Edison State Community College has partnered with Rave Mobile Safety to provide an emergency alert system called **Edison Alerts**. All current students, faculty and staff are automatically enrolled in the program. Upon enrollment, an email notification from Edison

Alerts will be sent to your Edison State email account, prompting you to complete the registration process. It is necessary to complete the registration process in order to receive Edison Alerts by text, phone and/or personal email.

- RAVE or Edison Alerts is information provided TO YOU—FROM EDISON STATE SECURITY, including campus closings, weather alerts or an emergency situation such as a bomb threat or active shooter.
- RAVE Guardian is a free app that enables YOU to provide information TO EDISON STATE SECURITY, including threatening or suspicious behavior, parking lot accidents or medical emergencies. Visit the [Campus Security and Safety](#) page for more information on the RAVE Guardian system.

If deemed necessary, a campus-wide alert will be issued in the event of that a situation arises that may institute a threat—either on or off campus. Students, faculty, staff and other registered users will receive a warning through the Edison Alerts system. Depending upon the particular circumstance(s) of the situation—and especially in all situations that could pose an immediate threat to the community and/or individuals—a notice may be posted on the College website and social media channels.

D. Leadership Succession and Authorities

List people who can make operational decisions if the head of your department or unit is absent.

	Name	Authorities and Limitations	Title	Phone Number	Alt Phone Number	Email
Head of Department/Unit	Yvonne Koors	Maintain MA student records/ internship placement/ ordering supplies/accreditation compliance /facilitating learning	MA Program Director	937-778-7947	937-825-9325	ykoors@edisonohio.edu
Successor	Brigit Snider,	Facilitating learning/as	Adju			bsnider@edisonohio.edu

r	CMA [AAMA]	sist with inventory/a ssist PD with accreditatio n needs	nct			o.edu
Successor	Abigail Bollinger	Completes all Po's/Assist s with new student orientation/ houses student files for required immunizati ons and campus paperwork.	APS	937-778- 7884		abollinger2@edison ohio.edu

E. Departmental Essential Functions

List essential operations, responsible staff and alternates. Cross-training for responsible and alternate staff is highly encouraged. Note the location of instructional and supporting documentation.

Function Description	Responsible and Alternate Staff	Identify Alternate Location (Is there an alternate location to perform work?)	Dependencies (internal or external partners you are dependent on)	Location of Supporting Documentation

Classroom and lab instruction	Entire department	In the event of a physical threat to the Troy campus such as fire or tornado, the MA students can work with nursing and MLT to utilize their space at the Piqua campus. Didactic courses can be offered remotely or fully online if needed	IT services and e-learning for remote and/or online support.	OneDrive for didactic information.
Obtain classroom/lab supplies	Program Director	Can order supplies remotely; however, there would be no need for the laboratory supplies if the laboratory courses were not accessible.	Medical supply companies (McKesson) that the department obtains supplies from. Shipping/receiving on campus to deliver supplies.	OneDrive, SharePoint, and computer hard drive.
Revise curriculum	Program Director	This would be delayed until normal operations	Can be done remotely until normal operations can	OneDrive which is shared with the APS and Dean for needed

		resume. If new mandates are given by authorities, the Program Director will make revisions to your curriculum	resume.	revisions before they are submitted for review.
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F: Access to Information and Systems

ESCC uses SharePoint for curriculum changes and approvals and is maintained by the IT department. When offsite/remote end users need to log in with their credentials to access SharePoint. Also, ESCC moved to a cloud-based system in outlook which is our email. All documents for the Medical Assisting department are housed on the Program Director's personal OneDrive account and shared with the Dean of Technical and Professional Education.

Student records, such as competency packets for each core course are in hard copy format and then scanned at the end of the semester by course and semester on OneDrive. Records that are five years old are then destroyed. This includes paperwork for internship and immunizations. ESCC is currently working with Medicat to house all required immunization records on a cloud-based server.

In the event of a natural disaster, the integrity of all documents required for legal reporting would not be in jeopardy.

G: Key Internal Dependencies

Dependency (product or service) :	Internet connectivity, e-mail services, on-line training platform
	Provider: Information Technology Department
Dependency (product or	Protection of students, staff and property

service) :	Department of Public Safety
Provider:	
Dependency (product or service) :	Receiving of program supplies
Provider:	Facilities/Maintenance
Dependency (product or service) : Provider:	Cleaning of classroom and lab spaces
	Facilities/Maintenance
Dependency (product or service) : Provider:	Ordering of classroom and lab supplies
	Business Office

H: Key External Dependencies

	Primary	Alternate
Dependency (product or service) :	Removal of medical waste	
Frequency of Service	4x per year or as needed	
Provider	Stericycle	NA
Primary Contacts	Vicky Parad	
Phone Numbers	<u>(866) 783-6188</u>	
	Primary	Alternate
Dependency (product or service) :	Disposable supplies/Equipment	same
Frequency of Service	1X per semester and as needed.	same

Provider	McKesson	Pocket Nurse
Primary Contacts	Brad Coggins MT, ASCP	Amy Hallstein
Phone Numbers	937-219-5482	<u>(800) 225-1600</u>
	Primary	Alternate
Dependency (product or service) :	Receiving of program supplies	NA
Frequency of Service	1X per semester and as needed.	
Provider	UPS, FedEx, etc.	
Primary Contacts		
Phone Numbers		

I. Relocation or Reallocation

In some potential scenarios, the building, office or other physical resources may not be available to you. In the event that your department must relocate or share resources with another group, consider the following:

	Resource
1. What physical resources are required to perform your essential functions? Include pre-printed forms, office equipment, computer equipment and telecommunication devices.	Computer/laptop Office phone Fax Copy machine
2. How much physical space would your unit need?	Room 104-84 sq ft Room 122-90 sq ft
3. Does your unit have any special needs such as refrigeration, temperature/humidity controls, etc.?	refrigeration

4. Are there special security requirements for a replacement space?	N/A
5. If the building/office is accessible, but there was an extended loss of power, is there essential equipment or material that would be at risk? Describe plans for back-up power.	N/A
6. Do you have any high value/difficult to replace equipment?	All medical equipment in the laboratory facility (CCW020) would be considered high value and would be difficult to replace.

J. Restoration

Resuming normal operations once the emergency situation or extended disruption has passed will require continued communication and coordination. Recognize that restoration could take an extended period of time. Potential considerations include:

- Work backlog-**deadlines will be set. However, if working remotely backlogging should not be an issue.**
- Integration of temporary data resources with permanent systems
- Resupply of resources – Maintain an inventory of high value equipment, information resources, and irreplaceable items including titles, model numbers, serial numbers, replacement value, etc. for Risk Management.-**Resupply of resources would be purchased out of the budget for the MA program. Grant writing is also available to assist with replacement of high dollar equipment. We also have monies in the Perkins grant if needed.**
- Continued absenteeism **We have a commitment form that we signed in the event of illness. If ill, we are asked to report to our supervisor the illness. In the event it is a long-term issue, we have FMLA.**
- Emotional/counseling needs **HR provides all staff and Faculty an assistance program called impact solutions.**

The College is committed to the full support of its students and employees; however, central service restoration may happen in stages depending on the extent of the disruption