

Clinical Instructor Sarrissa Ryan, AAS, BS, MSHS, LP, NRP, EMS-C Sryan4@com.edu Cell 682-272-9191

Clinical Coordinator Vanessa Murphy, AAS, BS

Email: vmudrphy@com.edu

Student hours and location: M-W-F 930 -1130 and Tu – Th 1400-1600 or By appointment. It can be in-person or video.

Required Textbook/Materials:

EMCE account –emce.app you can download from either your google play or I-phone store <u>www.myclinicalexchange.com</u> and com.surpath.com

Course Prerequisites & Co-requisites:

- 1. Students must show proof of immunizations.
- 2. Students must be certified in BLS Health Care Provider CPR in the past 12 months
- 3. Purchase the current colleges skills and rotations program
- 4. Students must pass a criminal background check.
- 5. Students must also be enrolled in EMSP or equivalent.
- 6. To attend and remain active in clinical, you must maintain a passing grade.
- 7. Complete all required clinical site orientations.
- 8. Stethoscope, and Trauma Shears

EMSP 2561. CLINICAL - EMERGENCY MEDICAL TECHNOLOGY

A health-related work-based learning experience that enables the student to apply specialized occupational theory, skills, and concepts. Direct supervision is provided by the clinical professional. As outlined in the learning plan, students will apply the theory, concepts, and skills involving specialized materials, tools, equipment, procedures, regulations, laws, and interactions within and among political, economic, environmental, social, and legal systems associated with the occupation and the business/industry; and will demonstrate legal and ethical behavior, safety practices, interpersonal and teamwork skills, and appropriate written and verbal communication skills using the terminology of the occupation and the business/ industry. This is an unpaid external learning experience. The Medical Director may, at his discretion, require additional experience beyond the minimum requirements. Instructor approval required.

- 1. Apply and use cardiac and respiratory arrest management, including the manual external defibrillator, and airway management.
- 2. Properly use equipment used to lift and move patients.
- 3. Engage in professional communication and documentation practices
- 4. To be familiar with ambulance operations, including emergency vehicle laws and regulations.

Course Rationale:

This course gives the student a foundation for the scope of practice of Paramedic. It is an unpaid external learning experience, and instructor approval is required. They will demonstrate legal and

Revised 1/2025



ethical behavior. Demonstrate safety practices and interpersonal and teamwork skills. Be able to use appropriate written and verbal communication skills using the terminology of the occupation and the business/industry.

Notice to Students Regarding Licensing: Effective September 1, 2017, HB 1508 amends the Texas Occupations Code Section 53 that requires education providers to notify potential or enrolled students that a criminal history may make them ineligible for an occupational license upon program completion. The following website provides links to information about the licensing process and requirements:

http://www.dshs.state.tx.us/emstraumasystems/qicriminal.shtm?terms=criminal%20background

Should you wish to request a review of the impact of criminal history on your potential EMT Certification prior to or during your quest for a degree, you can visit this link and request a "EMS Criminal History Pre-Screening"

http://www.dshs.state.tx.us/emstraumasystems/formsresources.shtm

This information is being provided to all persons who apply or enroll in the program, with notice of the requirements as described above, regardless of whether the person has been convicted of a criminal offense. Additionally, HB 1508 authorizes licensing agencies to require reimbursements when a student fails to receive the required notice.

	Student Learner Outcome	Maps to Core Objective	Assessed via this Assignment
1.	6	Critical Thinking: to include	Student Evaluation
	able to apply the life-saving	creative thinking, innovation,	form submitted
	knowledge they learned in the	inquiry, and analysis,	with each clinical
	Paramedic course in the	evaluation and synthesis of	attendance.
	clinical/field setting.	information.	
2.	Psychomotor: Students will	Empirical and Quantitative	Student Evaluation
	be able to apply the life	Skills: to include the	form submitted
	saving techniques they	manipulation and analysis of	with each clinical
	learned in the Paramedic	numerical data or observable	attendance.
	course in the clinical/field	facts resulting in informed	
	setting.	conclusions.	
3.	Affective: Students will	Teamwork: to include the	Student Evaluation
	display the proper attitude	ability to consider different	form is submitted
	expected of an Paramedic	points of view and to work	with each clinical
		effectively with others to	attendance.
		support a shared purpose or	
		goal	

Course Objectives and Learning Outcomes:



Course Objectives/Requirements

To complete this course, the student must meet the following patient contact requirements: A. Psychomotor Skills

- 1. The student must demonstrate the ability to effectively and safely complete the following skills:
 - a. 12 x Establish IV Access
 - b. 1 x Administer IV Infusion medication
 - c. 5 x Administer IV Bolus medication
 - d. 1 x Administer IM Injection
 - e. 1 x Establish IO Access
 - f. 5 x Perform PPV with a BVM
 - g. 5 x Perform oral endotracheal intubation
 - h. 1 x Perform endotracheal suctioning
 - i. 1 x Perform FBAO removal using Magill Forceps
 - j. 1 x Perform Cricothyrotomy
 - k. 5 x Insert supraglottic airway
 - 1. 1 x Perform needle decompression of the chest
- B. Ages
 - 1. The student must demonstrate the ability to perform a comprehensive assessment on 7 pediatric patients.
 - a. The student should perform an assessment on at least 2 (including neonates, infants, toddlers, preschool, school-age, and adolescent) pediatric patients.
 - 2. The student must demonstrate the ability to perform a comprehensive assessment on at least 15 adult patients.
 - 3. The student must demonstrate the ability to perform a comprehensive assessment on at least 8 geriatric patients (65 and older).
- C. Pathologies
 - 1. The student must demonstrate the ability to perform a comprehensive assessment on at least 9 trauma patients.
 - 2. The student must demonstrate the ability to perform a comprehensive assessment on at least 6 psychiatric patients.
 - 3. The student must demonstrate the ability to perform a comprehensive assessment on at least 2 Obstetric patients w/ 2 normal newborn care patients or 1 complicated obstetric delivery
 - 4. The student must demonstrate the ability to perform a comprehensive assessment on at least 1 distressed neonates (birth to 30 days)
 - 5. The student must demonstrate the ability to perform a comprehensive assessment on at least 6 cardiac pathologies/complaints.
 - 6. The student must demonstrate the ability to perform a comprehensive assessment on at least 1 Cardiac Arrest



- 7. The student must demonstrate the ability to perform a comprehensive assessment on at least 5 Cardiac dysrhythmias.
- 8. The student must demonstrate the ability to perform a comprehensive assessment on at least 5 Medical Neurologic pathologies/complaint patients.
- 9. The student must demonstrate the ability to perform a comprehensive assessment on at least 4 Respiratory Pathologies or complaint patients.
- 10. The student must demonstrate the ability to perform a comprehensive assessment on at least 6 other medical conditions or complaint patients.

Grading Scale:

 $\begin{array}{l} A-93-100=40+\ patient\ contacts\\ B-80-92\%=30-39\ Patient\\ C-70-79\%=25-29\ patient\ contacts\\ D-60-69\%=20-24\ patient\ contacts\\ F-64\%=19\ patient\ contacts\ or\ less \end{array}$

The listed minimum number of hours, competencies/skills, and patient contacts for this level of training must be met to qualify for a Course Completion Certificate necessary for National Registry examination authorization to earn a grade of a "B"80%.

If the minimum clinical course competencies cannot be met on a shift rotation time, the student must schedule additional clinical time to complete the skill or simulated patient contact in the lab. If any skill or patient contact is not completed, it results in a non-passing grade of a "D," and the student must retake the course.

Course Outline

- A. Introduction/Clinical Orientation Saturday, Jan 18, 2025, 0900 1700
 - 1. Introduction of EMS Staff, Instructors and students
 - 2. EMS program policies
 - 3. All immunization records, physical exam results, drug screen, and criminal background will be checked/discussed, and due the 2nd week of the semester
 - 4. Enroll in EMCE.app and myclinicalexchange.com
- B. Clinical Documentation Workshop TBD
 - 1. Introduction as to how reports should be written and submitted for all clinical rotations (Hospital or Ambulance)
- C. Skills Verification TBD
- D. Clinical rotations 240 hours (20 x 12 hr./shifts)
 - 1. Students will have the opportunity to complete their patient contacts either in the hospital and/or in the ambulance.



Times/Days TBD

- 2. Shifts will be scheduled for 12-hour blocks
 - a. Hospital Systems
 - HCA
 - UTMB
 - Memorial Herman
 - b. Ambulance Providers
 - Acadian Ambulance
 - Deer Park FD
 - La Porte EMS
 - Friendswood EMS
 - Seabrook EMS
 - Nassau Bay FD
 - League City EMS
 - Baytown FD
 - Texas City FD
 - GAAA (GEMS)
 - Santa Fe Fire and Rescue
 - La Marque EMS
 - Dickinson VFD
 - Brazoria County ESD 3
 - Pearland FD

Purpose: The purpose of the clinical and ambulance rotations is to assess patients presenting with various medical problems in a medically supervised facility or who call 911. It is at the preceptor's discretion which skills and medications the student may perform/administer during their clinical rotations.

During the clinical rotations in the ER, the student will:

- 3. Always utilize appropriate universal precautions.
- 4. Assist in the triage of patients.
- 5. Perform a patient assessment, including:
 - a. Vital signs, pulse oximetry, and glucose check
 - b. Obtain chief complaint and history of present illness.
 - c. Perform a physical exam.
 - d. Obtain medical history.
- 6. Demonstrate proper airway management and oxygen therapy.
- 7. Discuss and demonstrate knowledge of medication prior to administration, including looking up the medication for the following: indications, contraindications, proper dosage, side effects, calculations of dosage and proper administration technique (nebulized or oral). Only administer the medication under direct supervision of the RN, MD, or COM preceptor.



Never administer a medication you have not looked up.

8. Assist with the following: hemorrhage control, splinting techniques and cardiac arrest patients (CPR and or BVM).

During the field rotations with an EMS Service, the students will:

- 9. Always utilize appropriate universal precautions.
- 10. Assist in the triage of patients.
- 11. Perform a comprehensive patient assessment, including:
 - a. Vital signs, temperature and glucose check
 - b. Perform 4-lead and 12-lead EKG monitoring and interpretation
 - c. Obtain chief complaint and history of present illness.
 - d. Perform a physical exam.
 - e. Obtain medical history.
 - f. Perform ongoing patient assessments
- 12. Demonstrate proper airway management and oxygen therapy.
- 13. Assist with the following: hemorrhage control, splinting techniques, and cardiac arrest patients (CPR and or BVM).
- 14. Perform medication administration
- 15. Work as a member of an ambulance team
- 16. Document all patient contacts for that ambulance/hospital rotation.
- 17. The preceptor shall complete a student evaluation form.
- 18. Students shall complete a preceptor and site evaluation form.
- E. Simulation

Simulation can be used to enhance or substitute for required clinical hours. Accrediting agencies currently do not define an equivalence ratio between simulation and clinical hours for EMS education programs, however, evidence supports the use of a ratio of 2 clinical hours to 1 hour of simulation (Jimenez, 2017; Sullivan et al., 2019). This is due to the robust, compressed nature of simulation which enhances clinical reasoning by guiding students through purposeful, guaranteed learning experiences.

Allowable simulation contact hour substitutions by area:

- 1. Hospital / Emergency Room
 - a. 6 hospital simulation contact hours can be substituted for 12 hospital/emergency room contact hours.
- 2. Ambulance Service
 - a. 6 ambulance simulation contact hours can be substituted for 12 ambulance service contact hours.



Affective Grade: The affective evaluation measures the student's attitude, behavior, professional attributes, motivation, and values. You will not receive a separate grade; however, you must pass the evaluation to complete your courses successfully. To pass this evaluation, you must demonstrate professional behavior, ethics, and policy adherence. Failure to meet these standards will result in a student conference and the establishment of an improvement plan and period to accomplish the required tasks.

Significant, egregious threats to the well-being of others or repeated issues will fail the affective domain and, thus, the course. Students will be evaluated using the items described below. You can score from 0 to 3 points on each domain, as listed in the table below. Students are also evaluated after each clinical rotation. Students are expected to score at least one point on each domain, with the minimum points required being four. These points will be required for clinical and. The total required to pass the course is 12 points. Evaluation below three will result in a student conference and, if necessary, an improvement plan.

	Affective Domain	Exceeds Expectations (A) 3 points	Mets Expectations (B) 2 points	Minimally Met Expectations (C) 1 point	Minimum Expectation Not Met (D) 0 points
1.	Quality of cognitive components				
2.	Course of action in behaviors				
3.	Articulation of feelings, values, Ethics, and moral obligations				
4.	Congruency with professional ethics and values demonstration				

Attendance Policy: All lecture classes, labs, and clinical rotations require mandatory attendance. Class/Lab attendance is checked daily. If a student misses more than 24 hours or 10% of the course contact hours as per EMS program policy, the student will be dropped by or fail the course for excessive absences (time will count hour for hour). For extenuating circumstances, a request for hours to be made up will be considered at the program director's discretion. If the student is absent or tardy, they MUST contact their lead clinical Instructor or clinical coordinator before the start of the clinical.

Course Policies / Requirements: You must be in full uniform, be early, and present yourself as a professional healthcare provider. The student must complete evaluations for each site/preceptor at the end of each shift. All patient contacts and skills must be documented during the emergency department and ambulance shifts. Doing as much charting as possible during the shift is good

Revised 1/2025



practice. A complete report for each patient contact must be completed for hospital and ambulance shifts if the student wants that patient contact to count toward minimum requirements, and the completed report is due within 24 hours of the end of the shift. As a reminder, patient records are always confidential and do not document any patient identifier.

Lab/Simulation Skills Required

- 1. All required lab/simulation skills must be checked off before any student performs that skill in a clinical/field setting.
- 2. A preceptor must be present and at the student's side for a student to administer or help the patient self-administer any medications.

Before starting clinical instructions, the student must be signed off by an instructor on the following skills:

- 1. Demonstrate adult, child, and infant patient assessment.
- 2. Perform CPR adult, pediatric, and infant
- 3. Proper use of basic and advanced airway/ventilation adjuncts, including the bag-valvemask oxygen administration, oral suctioning, and orotracheal intubation (direct).
- 4. Measure baseline vital signs by palpation and auscultation, including pulse, respiration, EtCO2, pain, temperature, and blood pressure.
- 5. Initiate IV and IO access.
- 6. Medication administration IV, IM, PO
- 7. Perform spinal motion restriction, including sizing and application of cervical collars and short/long spinal motion restriction devices to supine, seated, and standing patients.
- 8. Apply tourniquet application, bandaging, splinting, stabilizing an impaled object, and traction splits.
- 9. Perform an uncomplicated delivery
- 10. Apply occlusive dressing to an open wound to the thorax

TBD: Students will coordinate their schedules with the Clinical Coordinator. Students must understand that it is ultimately up to the clinical site if the clinical site can accommodate the student on any day, at any time. The clinical sites reserve the right to dismiss a student from the clinical site without cause.

If a student is dismissed from a clinical site without cause they are to immediately contact the Clinical Coordinator for rescheduling. A student must send dates to the clinical coordinator to expedite the rescheduling of the shift.

Clinical Attendance

The number of clinical/EMS rotations available to students is limited, and strict attendance enforcement will be imposed. Please comply with all course policies to ensure the student is sent home. Your Clinical Coordinator may impose any restrictions or limits necessary to ensure fair and adequate clinical/EMS rotations availability. Students may only leave their assigned areas **Revised** 1/2025



with the Clinical Coordinator's permission. Students not in their assigned clinical/EMS site may be sent home or dropped from the course. You must contact the Clinical Coordinator if you cannot report to a scheduled clinical/EMS site. If the rotation is at an EMS site, you are also responsible for notifying the EMS provider agency.

Clinical Rotations

You may not schedule your rotations and must adhere to the schedule assigned by the Clinical Coordinator. No clinical rotations may be done while at work. All clinical rotations must be done as a third rider in the patient compartment. Students are prohibited from driving ambulances. Any questions or problems regarding your clinical rotations should be addressed to the Clinical Coordinator or refer to The COM EMS Clinical Handbook. COM Students will not be used as staff while performing clinical rotations.

Missed Class (Clinical) Time Policy:

The following is COM policy for any student who misses a clinical rotation:

Time missed by the student can jeopardize our clinical affiliation agreements. The EMS program can only operate with clinical affiliates. The Clinical Coordinator will have set date ranges for the duration of clinical rotation time. If you have any dates, you are not able to attend such as a wedding, funeral, or scheduled vacation or appointment for example you must notify the clinical coordinator in writing prior to the start of clinical rotations.

After assessing the clinical site and preceptor availability, the Clinical Coordinator will provide you with your set rotation schedule. Understand that:

- 1. Students will be given a date to complete the course, which they will adhere to.
- 2. You may not finish your clinical course on time.
- **3**. You may only be eligible to continue to the next EMSP course in the program once you have completed the current clinical course.
- 4. The missed time policy will continue to be enforced.

Medical or Injury Missed Clinical Time:

- 1. Medical illness the department will require a signed physician clearance to reenter clinical rotations.
- 2. Injury: The student will need a document from the program for a physician to clear them to return to class without restrictions and reenter clinical rotations.
- 3. If out sick with a communicable illness or injury that requires a visit to a doctor, the student can only continue in clinical once the student delivers a physician release to the Clinical Coordinator, which clears the student to return.
- 4. Suppose a student does any rotations without being medically cleared. In that case, the student's clinical rotations will be suspended until the student meets with the Program Director and faculty to evaluate continuance in the program, as this could jeopardize the clinical affiliation agreement.



If a student can continue in the program, any rotations without medical clearance will be considered null and void and must be rescheduled. A deadline will be established for rotation completion. The student will only succeed in the clinical course if the deadline is met.

Time Off During Clinical Courses

Vacation and time off will not be scheduled during clinical coursework after the start of clinical time. Accommodation will attempt to be honored if done prior to starting clinical only. This will allow the student to meet the requirement of course hour rotations per week unless the clinical coordinator approves notification before the start of clinical assignments and does not jeopardize course completion. Clinical coursework is part of the program; it is not considered "downtime."

Parking

Students are responsible for any parking fees required when attending clinical or ambulance rotations.

Make-Up Policy: There are no excused absences for mandatory sessions or clinicals. Rescheduling may occur at the discretion of the Clinical Coordinator, depending on circumstances.

College Statement-Academic Dishonesty

College policy and the Student Handbook will deal with any incident of academic policy. Academic dishonesty, such as cheating on exams, is a grave offense that will result in a grade of zero on that exam. The student will be referred to the Office of Student Conduct for appropriate disciplinary action, including dismissal from the EMS Program.

EMS Program Statement—Academic Dishonesty

The College of the Mainland EMS Program will not tolerate academic dishonesty. Disciplinary action will include but is not limited to, recording a "0" for the assignment. Dismissal is likely in incidents of cheating or falsification of clinical documents. *NOTICE: Falsifying any program document is grounds for immediate dismissal and may result in a report of all personnel involved under Texas Administrative Code RULE §157.36.*

Student Concerns: If you have any questions or concerns about any aspect of this clinical course, please contact the Clinical Instructor. Students can expect their issues to be addressed promptly and within reason. Using the method outlined here will ensure that problems are properly documented and, therefore, properly addressed.

Required Syllabus Reference

The EMSP faculty encourages students to problem-solve, work as a team, and utilize available resources. Additionally, the Course Syllabus is specifically written for student reference. Please always check each course's syllabus and class captain for guidance. Revised 1/2025



EMS Chain of Command

We employ chain-of-command policies like those in the workplace to develop workforcerelated professional skills.

- 1. If you have a problem or question, first consult the syllabus
- 2. Verbally discuss the issue with the Clinical Coordinator
 - a. Follow up an email to the Clinical Coordinator summarizing the meeting and your understanding of the outcomes.
 - b. If you are dissatisfied with the outcome, proceed to Step 3.
- 3. Forward your summary of the initial meeting to the Program Director and the Clinical Coordinator You should also state your desired outcome and justifications for that outcome.
 - a. You will be asked to meet in person with the Program Director.
 - b. As before, prepare a follow-up email summarizing the outcome of the meeting.
 - c. If dissatisfied with the outcome, you should proceed with Step 4.
- 4. Forward your summary of the initial meeting to the Department Chair, the Program Director, and the Clinical Coordinator. You should also state your desired outcome and justifications for that outcome.
 - a. You will be asked to meet with the Dean in person.
 - b. As before, prepare a follow-up email summarizing the outcome of the meeting.
 - c. If dissatisfied with the outcome, refer to the Student Handbook for the next steps. <u>COM Student Handbook</u>

NOTE: This process is not meant to be a barrier to you but instead to provide the following benefits:

-preparation for the workforce

-proper complaint/incident process

-practice in professional documentation

-ensures that issues are managed as close to the source as possible

Student Grievance Policy

If you have any questions or concerns about any aspect of this course, please contact your instructor using the contact information provided in the syllabus. Students have the right to expect their issues to be addressed. The method outlined here will ensure that problems are adequately documented and properly addressed.

Student Conferences

Course Instructors and Students are encouraged to schedule a mid-term and final Student conference with each Student. The primary objectives of the conference are to:



1. Instructor

a. Provide an overall evaluation of the students' classroom and clinical performance.

b. Provide the Student with specific performance improvement recommendations,

c. Address Student concerns

2. Student

a. Discuss the overall evaluation of classroom and clinical performance,

b. Discuss performance improvement methods and develop an improvement plan (if necessary)

c. Communicate course performance concerns to the instructor.

Students are encouraged to request a meeting with the course instructor to discuss performance concerns and course questions regardless of the mid-term or final Student conferences. The EMS program staff welcomes the students' sincere interest in their course performance and will gladly assist them with these issues.

Communicating with Faculty and Instructors

Students having course questions or concerns are requested to address them to the primary instructor for the course. If the Student feels they have received an inadequate response, the student should address the question or concern to the Clinical Coordinator. If this does not resolve the students' problem, they should contact the EMS Program Director.

Questions or concerns regarding clinical rotations must first be addressed to the Clinical Coordinator. More than verbal communication is required if you have an important message to give to the EMS Program faculty or staff. The faculty or staff may advise students to write a detailed and dated memo or email to the instructor. The student may wish to have two copies. If desired, the instructor or staff member will sign both copies so the student can keep one for their records. Although this is infrequently required, it can prevent incidents of miscommunication.

All program-related emails will be through your COM Student email address. You are expected to access your email at least daily, as all announcements regarding class and clinicals are emailed to you. All program-related emails will be exchanged through your COM Student email address. Do not ask COM EMS Program faculty or staff to send any course or school-related documents to your personal email address. If you email COM EMS staff from a non-COM student email address, do not expect a response, as these emails may be filtered into the "junk" or "spam" mailboxes. You are expected to access your email at least daily, as all announcements regarding class and clinicals are emailed to you. This may include location changes, homework assignments, extra credit, etc....

Institutional Policies and Guidelines



Grade Appeal Process: Concerns about the accuracy of grades should first be discussed with the instructor. A request for a change of grade is a formal request and must be made within six months of the grade assignment. Directions for filing an appeal can be found in the student handbook https://www.com.edu/student-services/docs/Student_Handbook_2024-2025_v2.pdf. An appeal will not be considered because of general dissatisfaction with a grade, penalty, or outcome of a course. Disagreement with the instructor's professional judgment of the quality of the student's work and performance is also not an admissible basis for a grade appeal.

Academic Success & Support Services: College of the Mainland is committed to providing students the necessary support and tools for success in their college careers. Support is offered through our Tutoring Services, Library, Counseling, and through Student Services. Please discuss any concerns with your faculty or an advisor.

ADA Statement: Any student with a documented disability needing academic accommodations is requested to contact:

Kimberly Lachney, Student Accessibility Services Coordinator Phone: 409-933-8919 Email: AccessibilityServices@com.edu Location: COM Doyle Family Administration Building, Student Success Center

Textbook Purchasing Statement: A student attending College of the Mainland is not under any obligation to purchase a textbook from the college-affiliated bookstore. The same textbook may also be available from an independent retailer, including an online retailer.

Withdrawal Policy: Students may withdraw from this course for any reason prior to the last eligible day for a "W" grade. Before withdrawing students should speak with the instructor and consult an advisor. Students are permitted to withdraw only six times during their college career by state law. The last date to withdraw from the 1st 8-week session is February 26. The last date to withdraw from the 16-week session is April 21. The last date to withdraw for the 2nd 8-week session is April 30.

FN Grading: The FN grade is issued in cases of failure due to a lack of attendance, as determined by the instructor. The FN grade may be issued for cases in which the student ceases or fails to attend class, submit assignments, or participate in required capacities, and for which the student has failed to withdraw. The issuing of the FN grade is at the discretion of the instructor. The last date of attendance should be documented for submission of an FN grade.

Revised 1/2025



Early Alert Program: The Student Success Center at College of the Mainland has implemented an Early Alert Program because student success and retention are very important to us. I have been

asked to refer students to the program throughout the semester if they are having difficulty completing assignments or have poor attendance. If you are referred to the Early Alert Program you will be contacted by someone in the Student Success Center who will schedule a meeting with you to see what assistance they can offer in order for you to meet your academic goals.

Resources to Help with Stress:

If you are experiencing stress or anxiety about your daily living needs including food, housing or just feel you could benefit from free resources to help you through a difficult time, please click here https://www.com.edu/community-resource-center/. College of the Mainland has partnered with free community resources to help you stay on track with your schoolwork, by addressing life issues that get in the way of doing your best in school. All services are private and confidential. You may also contact the Dean of Students office at deanofstudents@com.edu or communityresources@com.edu.

Nondiscrimination Statement:

The College District prohibits discrimination, including harassment, against any individual on the basis of race, color, religion, national origin, age, veteran status, disability, sex, sexual orientation, gender (including gender identity and gender expression), or any other basis prohibited by law. Retaliation against anyone involved in the complaint process is a violation of College District policy.