



College of Eastern Idaho
Nursing Programs (LPN and RN)
Nursing Student Handbook/Codes

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Welcome and Accreditation Information

The faculty and staff of the College of Eastern Idaho (CEI) and the Department of Nursing welcome you. We are excited you have chosen us to assist you in earning your Associate of Applied Science (AAS) degree (RN students) or Intermediate Technical Certificate (ITC) (PN students). This handbook will help you understand the program's mission, curricula, outcomes, and expectations. The information will assist you in your success in the program. These programs are rigorous and time intensive. They require self-discipline, dedication, and hard work. As you apply these traits in your pursuit, you will succeed. We look forward to working with you and contributing to your success.

College of Eastern Idaho (CEI) is accredited by the Northwest Commission on Colleges and Universities (NWCCU) and is approved by the Idaho State Board of Education and the Idaho Career & Technical Education Department.

Academic or occupational programs that are either accredited or approved by an external entity may have policies or procedures that are different or more restrictive than those of the College. To the extent permitted by CEI policy and applicable law, program-specific nursing requirements may impose additional or more stringent standards than generally applicable College policies due to accreditation, licensure, patient safety, and clinical partner requirements.

College of Eastern Idaho ADN program is accredited by the:
Accreditation Commission for Education in Nursing, Inc.
3390 Peachtree Rd NE, STE 1400
Atlanta, GA 30326
(404) 975-5000
www.acenursing.org

College of Eastern Idaho ADN program is approved by the:
Idaho State Board of Nursing
280 N. 8th St. #210
Boise, ID 83702
(208) 577-2476

LPN Program:

Effective December 10, 2024, this nursing program is a candidate for initial accreditation by the Accreditation Commission for Education in Nursing. This candidacy status expires on December 10, 2026.

Accreditation Commission for Education in Nursing (ACEN)

3390 Peachtree Road NE, Suite 1400

Atlanta, GA 30326

(404) 975-5000

<https://www.acenursing.org/search-programs?status=Candidate>

Note: Upon granting of initial accreditation by the ACEN Board of Commissioners, the effective date of initial accreditation is the date on which the nursing program was approved by the ACEN as a candidate program that concluded in the Board of Commissioners granting initial accreditation.

College of Eastern Idaho PN program is approved by the:

Idaho State Board of Nursing

280 N. 8th St. #210

Boise, ID 83702

(208) 577-2476

Introduction

This handbook is subject to change. Prospective and continuing students are responsible and accountable for reviewing and understanding any updates, which will be communicated via cei.edu email.

Potential nursing applicants must be admitted to CEI to apply for any nursing program options.

Admission to CEI does not automatically guarantee admission to the Department of Nursing.

Admission to the Department of Nursing is no guarantee of graduation from the nursing program or from the College of Eastern Idaho.

Conditional Acceptance

Acceptance is given on a “conditional” basis. If the student does not complete any pre-requisites being taken during the admission process with at least a C+, the conditional acceptance will be rescinded.

Additionally, after acceptance, the student will be given a list of tasks to complete prior to full acceptance. These tasks will be detailed in a “next steps” letter, and will include instructions on completing drug screening, completing required immunizations, attending mandatory program

orientations, how to enter information into the clinical site compliance tool, and more. If any of these steps are not completed, the conditional acceptance may be rescinded. Please pay close attention to the “next steps” letter which will be sent to your CEI email.

Essential Characteristics and Required Time Commitment for Successful Completion of the Nursing Programs.

Students must be aware that the Department of Nursing courses are rigorous and demand a management plan PRIOR to entry into the Department of Nursing. Nursing students should expect to spend approximately 40-60 hours per week for full-time students and 30-40 hours per week for Alternative Schedule or Bridge program students in class, laboratories and studying. Students should expect to study a *minimum* of two (2) hours per enrolled credit hour, per week, to achieve at least a “C+” in their nursing courses. The skills/SIM lab exercises require considerable preparation and time in addition to their scheduled hours. Any additional activities or employment could negatively impact a student’s ability to be successful in their program.

CEI Nursing programs require that students be self-motivated learners. By the end of the program, you will have invested your time, energy, and resources to complete this program and we want you to be successful. We expect you to be an involved, active member of your program who will contribute with thorough preparation, as well as active and timely participation in course discussions, activities, and clinical experiences. It is also essential that you can work effectively both independently and as a part of a group. A demonstrated inability to do so may result in dismissal from the program.

College of Eastern Idaho Department of Nursing Program Description

The nursing programs at CEI prepare students to take the National Council Licensure Examination (NCLEX) for either RN or PN and apply for licensure to practice as a Registered Nurse (RN) or Licensed Practical Nurse (LPN) in the state of Idaho. Students will expand their nursing knowledge and skills, focusing on critical thinking and clinical reasoning, to provide independent, holistic, safe, and competent nursing care. The curricula integrate general education and nursing program requirements. Nursing courses utilize a combination of classroom theory, hands-on lab experience, low- and high-fidelity patient simulation, and direct patient care in various health care agencies. These programs prepare students to participate as contributing members of a health care team, rendering direct patient care to patients and their support network. Upon completion of the RN program, the student receives an Associate of Applied Science (AAS) degree and is eligible for licensure as a RN after successful completion of the national licensure exam. Upon completion of the PN program, the student receives an Intermediate Technical Certificate (ITC) and is eligible for licensure as an LPN after successful completion of the National Council Licensure Exam-PN.

The CEI Department of Nursing offers two programs, the LPN (PN) program and the RN program. Within the RN Program there are three options.

1. PN Program
2. RN Program
 - i. Full-time option
 - ii. Alternative Schedule option
 - iii. LPN to RN Bridge option

Additionally, students may choose to take additional credits and receive an AS in addition to their AAS Nursing. If interested in this option, they should contact their advisor for further information.

Articulation Agreements

Articulation agreements create seamless transitions between community colleges and four-year institutions. CEI's AAS Nursing Program has developed articulation agreements with several four-year institutions to enable our students to have a clear pathway to achieving a BSN (Bachelors of Science in Nursing) in as little as one semester after graduation (with concurrent enrollment at CEI and the 4-year institution chosen). The CEI Nursing AAS program currently holds articulation agreements with the following schools:

Grand Canyon University
Lewis Clark State College.

Additionally, although they do not participate in formal articulation agreements, many students have successfully completed their BSN through Boise State University and Idaho State University, who both strive to work with students one on one to create individual pathways for their BSN. Further information about these options will be provided via emails, informational meetings, and on campus visits with the 4-year institutions. If you have questions, your advisor can provide you with contact information for these institutions.

Any student pursuing a BSN pathway is responsible for notifying their advisor, current instructors (each semester) and Nurse Administrator.

Nursing Faculty, Full-Time

| Name | Position |
|------------------------------------|--|
| Kirsten Erickson, MSN, RN | Nurse Chair/Co-Administrator PN/RN Instructor |
| Ashley Anderson, PhD, MPH, RN, CNE | Co-Administrator PN/RN Instructor |
| Kacey Call, MSN, RN | SIM Coordinator PN/RN Instructor |
| Sarah Dye, MSN, RN | PN/RN Instructor |
| Regan Fregoso, MSN, RN | PN/RN Instructor |
| Catherine George, MSN, RN, CNE | PN/RN Instructor |
| Brittany Harker, DNP, RN | PN/RN Instructor |
| Sara Larsen, MSN, RN | PN/RN Instructor |
| Mersadie Lloyd, MSN, RN | Clinical Coordinator PN/RN Instructor |
| Celynn Merrill MSN, RN | PN/RN Instructor |
| Shawna Morris, MSN, RN | Skills Lab Coordinator PN/RN Instructor |
| Leigh Short, MSN, RN, FNP-C | PN/RN Instructor |
| Jeremy Smith, BS, RN | PR/RN Instructor |
| Christopher Smout, MSN, RN | PN/RN Instructor |
| Danielle Thompson, MSN, RN | PN/RN Instructor |

Scope and Sequence LPN Program

Scope and Sequence and Credit to Clock Hours LPN Program

| Course | Credit hours total | Didactic Credit Hours | Laboratory Credit hours 1:2 | Clinical credit Hours 1:3) |
|------------|--------------------|-----------------------|-----------------------------|----------------------------|
| Semester 1 | | | | |
| ARN 120 | 3 | 3 | 0 | 0 |
| ENGL 101 | 3 | 3 | 0 | 0 |
| MATH 153 | 3 | 3 | 0 | 0 |
| BIOL 227 | 4 | 3 | | 0 |
| BIOL 227 L | 0 | 0 | 1 (1:3) ratio | 0 |
| NUR 101 | 3 | 2 | 1 (1:2 ratio) | 0 |
| Semester 2 | | | | |
| BIOL 228 | 4 | 3 | 0 | 0 |
| BIOL 228 L | 0 | 0 | 1 (1:3) ratio | |
| NRS 117 | 4 | 4 | 0 | 0 |
| NRS 117 L | 2 | 0 | 2 | 0 |
| NRS 143 | 5 | 3.5 | 0 | 1.5 |
| Semester 3 | | | | |
| ARN 220 | 3 | 2.5 | 0 | 0.5 |
| NRS 207 | 3 | 2.5 | 0 | 0.5 |
| ARN 165 | 2 | 2 | 0 | 0 |
| NRS 285 | 1 | 1 | 0 | 0 |
| NRS 243 | 5 | 3 | 0 | 2 |
| HCT 125 | 1 | 1 | 0 | 0 |
| Total | 28 | 21.5 | 2 | 4.5 |

Scope and Sequence and Credit to Clock Hours RN Program FT

| Course | Credit hours total | Didactic Credit Hours | Laboratory Credit hours 1:2 | Clinical credit Hours 1:3) |
|---------------|--------------------|-----------------------|-----------------------------|----------------------------|
| Prerequisites | | | | |

| | | | | |
|-----------------------|----|-----|----------------|-----|
| ENGL 101 | 3 | 3 | 0 | 0 |
| MATH 153 | 3 | 3 | 0 | 0 |
| BIOL 227 | 4 | 3 | 0 | 0 |
| BIOL 227L | 0 | 0 | 1 (1: 3) ratio | |
| Psych or Soc 101 | 3 | 3 | 0 | 0 |
| MICRO 111 | 3 | 3 | 0 | 0 |
| MICRO 111L | 1 | 0 | 1 | 0 |
| Semester 1 of Program | | | | |
| ARN 120 | 3 | 3 | 0 | 0 |
| ARN 100 | 4 | 4 | 0 | 0 |
| ARN 100 L | 2 | 0 | 2 | 0 |
| BIOL 228 | 4 | 3 | 0 | 0 |
| BIOL 228L | 0 | 0 | 1 (1: 3) ratio | |
| ARN 165 | 2 | 2 | 0 | 0 |
| Semester 2 of Program | | | | |
| ARN 155 | 4 | 3 | 0 | 1 |
| ARN 220 | 3 | 2.5 | 0 | 0.5 |
| ARN 130 | 2 | 2 | 0 | 0 |
| ARN 130L | 1 | 0 | 1 | 0 |
| HCT 125 | 1 | 1 | 0 | 0 |
| COMM 101 | 3 | 3 | 0 | 0 |
| Semester 3 of Program | | | | |
| ARN 215 | 5 | 4 | 0 | 1 |
| ARN 240 | 3 | 3 | 0 | 0 |
| ARN 250 | 1 | 0 | 0 | 1 |
| ENGL 102 | 3 | 3 | 0 | 0 |
| Semester 4 of Program | | | | |
| ARN 280 | 10 | 1 | 0 | 9 |
| ARN 285 | 1 | 1 | 0 | 0 |
| ENGL 175 or | 3 | 3 | 0 | 0 |

| | | | | |
|-----------------------|--|--|--|--|
| equivalent humanities | | | | |
|-----------------------|--|--|--|--|

RN AS Program

| Course | Credit hours total | Didactic Credit Hours | Laboratory Credit hours 1:2 | Clinical credit Hours 1:3) |
|-----------------------------------|--------------------|-----------------------|-----------------------------|----------------------------|
| Prerequisites | | | | |
| ENGL 101 | 3 | 3 | 0 | 0 |
| MATH 153 | 3 | 3 | 0 | 0 |
| BIOL 227 | 4 | 3 | 0 | 0 |
| BIOL 227L | 0 | 0 | 1 (1: 3) ratio | |
| Psych or Soc 101 | 3 | 3 | 0 | 0 |
| MICRO 111 | 3 | 3 | 0 | 0 |
| MICRO 111L | 1 | 0 | 1 | 0 |
| BIOL 228 | 4 | 3 | 0 | 0 |
| BIOL 228L | 0 | 0 | 1 (1: 3) ratio | |
| COMM 101 | 3 | 3 | 0 | 0 |
| ENGL 102 | 3 | 3 | 0 | 0 |
| ENGL 175 or equivalent humanities | 3 | 3 | 0 | 0 |
| Semester 1 of Program (Spring) | | | | |
| ARN 120 | 3 | 3 | 0 | 0 |
| ARN 100 | 4 | 4 | 0 | 0 |
| ARN 100 L | 2 | 0 | 2 | 0 |
| Semester 2 of Program (Summer) | | | | |
| ARN 220 | 3 | 2.5 | 0 | 0.5 |

| | | | | |
|--------------------------------|----|---|---|---|
| HCT 125 | 1 | 1 | 0 | 0 |
| Semester 3 of Program (Fall) | | | | |
| ARN 155 | 4 | 3 | 0 | 1 |
| ARN 130 | 2 | 2 | 0 | 0 |
| ARN 130L | 1 | 0 | 1 | 0 |
| Semester 4 of Program (Spring) | | | | |
| ARN 215 | 5 | 4 | 0 | 1 |
| ARN 240 | 3 | 3 | 0 | 0 |
| Semester 5 of Program (Summer) | | | | |
| ARN 250 | 1 | 0 | 0 | 1 |
| ARN 165 | 2 | 2 | 0 | 0 |
| Semester 6 of Program (Fall) | | | | |
| ARN 280 | 10 | 1 | 0 | 9 |
| ARN 285 | 1 | 1 | 0 | 0 |

RN Bridge Program

| Course | Credit hours total | Didactic Credit Hours | Laboratory Credit hours 1:2 | Clinical credit Hours 1:3) |
|------------------|--------------------|-----------------------|-----------------------------|----------------------------|
| Prerequisites | | | | |
| ENGL 101 | 3 | 3 | 0 | 0 |
| MATH 153 | 3 | 3 | 0 | 0 |
| BIOL 227 | 4 | 3 | 0 | 0 |
| BIOL 227L | 0 | 0 | 1 (1: 3) ratio | |
| Psych or Soc 101 | 3 | 3 | 0 | 0 |
| MICRO 111 | 3 | 3 | 0 | 0 |
| MICRO 111L | 1 | 0 | 1 | 0 |
| BIOL 228 | 4 | 3 | 0 | 0 |

| | | | | |
|--|---|-----|----------------|-----|
| BIOL 228L | 0 | 0 | 1 (1: 3) ratio | |
| COMM 101 | 3 | 3 | 0 | 0 |
| ENGL 102 | 3 | 3 | 0 | 0 |
| ENGL 175 or equivalent humanities | 3 | 3 | 0 | 0 |
| Semester 1 of Program (Summer) | | | | |
| ARN 120 | 3 | 3 | 0 | 0 |
| ARN 220 | 3 | 2.5 | 0 | 0.5 |
| Semester 2 of Program (Fall) | | | | |
| ARN 205 | 5 | 4 | 0 | 1 |
| ARN 245 | 3 | 2 | 1 | 0 |
| ARN 165 | 2 | 2 | 0 | 0 |
| NRS 207 | 3 | 2.5 | 0 | 0.5 |
| Semester 3 of Program (Spring) | | | | |
| ARN 230 | 2 | 2 | 0 | 0 |
| ARN 235 | 1 | 0 | 0 | 1 |
| ARN 275 | 4 | 1 | 0 | 3 |
| ARN 276 | 5 | 0 | 0 | 0 |
| ARN 130L | 1 | 0 | 1 | 0 |
| ARN 285 | 1 | 1 | 0 | 0 |

CEI Nursing Department Mission, Vision, and Philosophy

Mission

Our mission is to serve individuals and communities through educating competent, compassionate, and knowledgeable nursing students.

Vision

Our vision is to inspire educators, students and the community through an environment of desire, trust, respect, inclusion, collaboration, and need. To welcome and adopt change created by current evidence-based practices in education and nursing. To exemplify the goodness of the nursing profession.

Philosophy

We aim to provide a superior quality education, centered on positive and reflective learning experiences; provide students with foundational nursing knowledge; and ensure necessary competencies required to enter the workforce.

Organizing Structure and Major Concepts

The program of learning for the CEI nursing programs reflects the program’s philosophy and supports the institution’s mission statement and core values. It provides a foundation and direction of our shared vision and educational plan. It reflects the National League of Nursing (NLN) *Competencies for Graduates of Nursing Education Programs*, Quality and Safety Education for Nurses (QSEN) competencies, The Joint Commission (TJC) *National Patient Safety Goals*®, and American Nurses Association (ANA) 2015 *Code of Ethics for Nurses*. It’s structured around four **core concepts**. These concepts are patient-centered care, nursing judgment, active learning, and professional identity. Ten **foundational concepts** support these **core concepts**. They are integrity, compassion, accountability, self-improvement, critical thinking, safety, collaboration, cultural competence, and evidence-based practice. They provide the guidance for desired expectations necessary to achieve the end-of-program student learning outcomes (**EPSLOs**).

Registered Nursing End-Of-Program Student Learning Outcomes (EPSLOs)

At the completion of the CEI nursing program, the graduate will be able to:

| | |
|-----------------------|--|
| Patient-Centered Care | Demonstrate compassionate and culturally competent patient-centered care in the Registered Nurse’s role of an interdisciplinary healthcare team. |
| Nursing Judgment | Utilize nursing judgment to develop and institute safe, quality care. |
| Active Learning | Actively seek quality information from current, reliable sources, as appropriate at an associate degree Registered Nurse level, to maintain current best practices in nursing. |
| Professional Identity | Exhibit professional values and attributes of a Registered Nurse. |

Practical Nursing End-of-Program Student Learning Outcomes (EPSLOs)

At the completion of the CEI nursing program, the graduate will be able to:

| | |
|-----------------------|--|
| Patient-Centered Care | Demonstrate compassionate and culturally competent patient-centered care in the Licensed Practical Nurse’s role of an interdisciplinary healthcare team. |
| Nursing Judgment | Utilize nursing judgment to participate in the development and assist in the implementation of safe, quality care. |
| Active Learning | Actively seek quality information from current, reliable sources, as appropriate at a Licensed Practical Nurse level, to maintain current best practices in nursing. |

| | |
|-----------------------|---|
| Professional Identity | Exhibit professional values and attributes of a Licensed Practical Nurse. |
|-----------------------|---|

Definitions of *Core Concepts*:

Patient-Centered Care:

Purposeful involvement of patients, support systems, and interdisciplinary healthcare teams in determining and providing care. This includes respect, advocacy, empathy, cultural awareness and communication.

Nursing Judgment:

Utilization of the nursing process, critical thinking, and clinical reasoning, in delivering safe and competent evidence-based care.

Active Learning:

Understanding that best practices for nursing care are ever evolving and that it is necessary to actively search out current best practice.

Professional Identity:

Development of core values, beliefs, and practices through reflection on experiences within the nursing profession.

Definitions of *Foundational Concepts*:

Integrity:

Strong moral and ethical principles with adherence to honesty in dealings and practice.

Compassion:

An attitude of caring, empathy, concern, and kindness in your association with others.

Accountability:

An obligation to be responsible for your actions regardless of the outcome.

Self-improvement:

A strong internal desire to achieve success and improvement without needing motivation from others.

Nursing Judgment:

Interpreting, analyzing, reflecting, and evaluating knowledge and information to provide safe and effective nursing care.

Safety:

Incorporates scope of practice, adherence to policies and protocols, and the prevention of harm, errors, and adverse effects to patients and self.

Collaboration:

Functioning effectively with other healthcare providers and interdisciplinary teams to establish quality patient care.

Communication:

Verbal, nonverbal, and written exchange of information or expression of thoughts, ideas, or feelings between two or more people. It is essential for nurse-patient relationships and collaboration with interdisciplinary teams.

Cultural competence:

The ability to interact effectively with patients and families from various cultures, maintaining a nonjudgmental attitude, and gaining awareness and additional knowledge of their culture as necessary.

Evidence-based practice:

Integrating current evidence with clinical expertise and research to provide optimal patient care.

Legal Limitations for Nurse Licensure

All students and faculty are upheld to the Idaho State Board Practice Act. Any violations of the State Board of Nursing IDAPA 24.34.01, will be immediately reported to the Idaho State Board of Nursing for investigation and may result in removal from the course they are enrolled in or teaching.

Prior or New Violations or Disciplinary Action against a License of Certification.

Prior issues associated with violations against one's license or certification will be considered on a case-by-case basis. Students must contact the Idaho Board of Nursing to consult about the possibility of being licensed PRIOR to application to a nursing program. The Department of Nursing reserves the right to deny entry to students with prior violations based on concerns for safety.

The student must report all new criminal convictions, probation and/or other legal restrictions to the Nursing Administrator promptly.

Notice of Ability to Become Licensed after Graduation

Graduation from the college or the nursing program is not the sole criteria for obtaining a license to practice nursing in the state of Idaho at any level. Licensing requirements are the exclusive responsibility of the State Boards of Nursing, and those requirements are independent of any requirements for graduation from the College. Students with questions about being licensed must contact the Idaho State Board of Nursing directly. The Department of Nursing recommends students unsure of their ability to become licensed post-graduation should contact the Board PRIOR to application into any nursing program or course. Licensure requirements vary from state to state. Graduates from CEI's nursing program meet the state of Idaho's RN and LPN educational requirements.

CEI Campus Assistance

Access and Disability Resource Accommodations

For more information on CEI's access and disability resource accommodations, see CEI's website.

To [request a reasonable accommodation](#), students must contact Student Accessibility Services Center. Services can be requested at any time during the semester. Requesting services well in advance will help ensure that resources are available when needed.

- A. Accommodations will only be valid for the semester/ course applied and will not carry over to future semesters or courses. The student is responsible for renewing and submitting their accommodations each semester.
- B. Accommodations for additional testing time are not extended to include any additional time related accommodation for the student at any *clinical setting*.
- C. All accommodations must be initiated and approved by the Student Accessibility Services Center and reviewed by the Department of Nursing.
- D. We encourage students requiring accommodations to pursue those accommodations early in the nursing program, so they have that documentation, if needed, to receive accommodations for NCLEX testing.

Student Accessibility Services Center contact information:

Building 3, Student Affairs Office 311B

208-535-5462

Lea.hartman@cei.edu

Campus Resources

One of CEI's missions is to be student centered, and faculty and staff are very willing to assist students in their success. In addition to CEI's Disability Resource Center, CEI has the following resources available to help with learning as well as personal, family, or financial concerns (see CEI website):

- Center for New Directions
- Counseling Center
- Tutoring Center
- CEI library (online resources and on campus)

CEI Nursing Technology Requirements

Access to a computer and the internet is required. Courses are presented using an online format to disperse course information and most courses include online assignments. Computers are available for use by students on campus, but a personal laptop is recommended. Students should be familiar with computer use, word processing skills, and internet use.

Microsoft Office Suite (Word, Excel, etc.) is provided to CEI students at no cost.

CEIs nursing programs highly utilize ATI resources. For ATI's recommended technology requirements, please follow the below link:

<https://atitesting.com/technical-requirements>

Consequences for Violation of Standards of the handbook:

Per CEI's Student Code of Conduct, Procedure 907.1 Additional Codes of Conduct for Specific College Programs: "Specific College programs (e.g., Nursing, Energy Systems Technology) may adopt additional Student codes of conduct tailored to a particular program's distinct needs ("Program Codes")." **The Standards and expectations specified in this handbook comprise these Nursing Program Codes (or Nursing "Codes of Conduct").**

Nursing is a high-stakes field, so nursing students must uphold the highest standards of professionalism and integrity. As a result, any demonstration of unprofessional behavior/violation of the Codes/standards/expectations listed in this handbook are subject to corrective and/or disciplinary action through either CEI's Academic Integrity Code or CEI's Code of Conduct. Resulting consequences may include, but are not limited to, verbal correction, written warnings, failure of the course, or dismissal from the program.

Behavioral Standards

Professionalism in the nursing program

Professionalism is a foundational expectation of all nursing students and is demonstrated through behavior that reflects integrity, accountability, respect, ethical practice, and a commitment to patient safety. Professional conduct includes appropriate communication, reliability, punctuality, respect for others without exception, maintenance of boundaries, and the ability to accept feedback and responsibility for one's actions. Students are expected to represent the nursing profession positively in classroom, lab, clinical, and community settings, as well as in all written, verbal, and electronic communications.

Professionalism is not limited to individual behavior; it also includes adherence to institutional expectations. Much of the content throughout this Nursing Student Handbook addresses standards of professionalism, whether explicitly or implicitly. Following all policies, procedures, and standards outlined in the Nursing Student Handbook, in addition to college, clinical site, and program requirements, is an essential component of professional conduct. Failure to comply with established expectations may be viewed as unprofessional behavior and may result in corrective or disciplinary action consistent with program standards.

Standards of Professional Conduct

All nursing students are required to demonstrate the following standards of conduct throughout their program:

Accountability - Answering for one's actions to self, the client, the profession, and the college.

Ethics - Adhering to the Nurse's Code of Ethics (ANA, 2015).

Legal - Operating within the standards of care related to the nursing student role.

Honesty – Practicing truthfulness, accuracy, and transparency in words, actions, and academic or clinical work.

Fairness - treating all students, faculty, patients, and members of the healthcare team equitably and without bias, and avoiding making judgments or conclusions without all relevant facts

Dependability - Being trustworthy and reliable.

Respect - Treating others and oneself with consideration and courtesy.

Responsibility - Performing duties associated with the nurse's particular role.

Confidentiality - Protecting the privacy of clients by safeguarding privileged and sensitive information.

Punctuality - Arriving on time for all classroom and clinical assignments.

Professional Appearance – Following personal appearance and uniform standards at all CEI activities.

CEI Department of Nursing Guiding Documents:

The College of Eastern Idaho Department of Nursing adopts the following documents as part of the standards for all nursing programs. Students are responsible to read, understand, and abide by these documents. While some of these documents are written for Registered Nurses and Licensed Practical Nurses, nursing students are required to apply the rules to their situation. In cases where the text is not included in this document, sources are hyperlinked for convenience. If the hyperlink is broken, the student is responsible for finding the source. If they cannot, they should ask for help from their nursing instructor:

- a. **Rules of Idaho Board of Nursing IDAPA 24.34.01 Section 101**
- b. **College of Eastern Idaho Code of Conduct**
- c. **College of Eastern Idaho Academic Integrity Code**
- d. [American Nurses Association \(ANA\) Code of Ethics](#)
- e. **American Nurses Association (ANA) Principles for Social Networking**
- f. **CEI Department of Nursing Core Concepts and Foundational Concepts (see this Handbook)**

Rules of the Idaho Board of Nursing

The following are the current IBN Standards of Conduct as of 04/22/2026 and will be reviewed annually by faculty for changes.

Standards of Conduct. (3-28-23)

a. License. (3-28-23)

i. Reporting Grossly Negligent or Reckless Practice. The nurse shall report to the Board any licensed nurse who is grossly negligent or reckless in performing nursing functions or who otherwise violates the Nursing Practice Act or the Board rules. (3-28-23)

ii. Unlawful Use of License. The nurse shall not permit their license to be used by another person for any purpose or permit unlicensed persons under their jurisdiction or supervision to indicate in any way that they are licensed to perform functions restricted to licensed persons. (3-28-23)

b. Practice. The nurse shall have knowledge of the statutes and rules governing nursing and function within the defined legal scope of nursing practice, not assume any duty or responsibility within the practice of nursing without adequate training: (3-28-23)

i. Delegate activities only to persons who are competent and qualified to undertake and perform the delegated activities and will not delegate to non-licensed persons functions that are to be performed only by licensed nurses. The nurse delegating functions is to supervise the persons to whom the functions have been assigned or delegated. (3-28-23)

ii. Act to safeguard the patient from the incompetent practice, verbal or physical abusive acts or illegal practice of any person. (3-28-23)

iii. Not obtain, possess, furnish or administer prescription drugs to any person, including self, except as directed by a person authorized by law. (3-28-23)

- iv. Not abandon patients in need of nursing care in a negligent manner. The nurse will leave a nursing assignment only after properly reporting and notifying appropriate personnel and will transfer responsibilities to appropriate personnel or care giver when continued care is necessitated by the patient's condition. (3-28-23)
 - v. Respect the patient's privacy. (3-28-23)
 - vi. Observe the condition and signs and symptoms of a patient, record the information, and report to appropriate persons any significant changes. (3-28-23)
 - vii. Function as a member of the health team and shall collaborate with other health team members as necessary to meet the patient's health needs. (3-28-23)
 - viii. Adhere to precautions and carry out principles of asepsis and infection control and not place the patient, the patient's family or the nurse's coworkers at risk for the transmission of infectious diseases. (3-28-23)
03. Professional Responsibility. (3-28-23)
- a. Disclosing Contents of Licensing Examination. The nurse is not to disclose contents of any licensing examination, or solicit, accept, or compile information regarding the contents of any examination before, during, or after its administration. (3-28-23)
 - b. Considerations in Providing Care. In providing nursing care, the nurse will respect and consider the individual's human dignity, health problems, personal attributes, national origin, and handicaps and not discriminate on the basis of age, sex, race, religion, economic or social status or sexual preferences. (3-28-23)
 - c. Responsibility and Accountability Assumed. The nurse is responsible and accountable for their nursing judgments, actions and competence. (3-28-23)
 - d. Witnessing Wastage of Controlled Substances Medication. Controlled substances may not be wasted without witnesses. The nurse cannot sign any record as a witness attesting to the wastage of controlled substance medications unless the wastage was personally witnessed. The nurse cannot solicit the signatures on any record of a person as a witness to the wastage of a controlled substance when that person did not witness the wastage. The nurse will solicit signatures of individuals who witnessed the wastage in a timely manner. (3-28-23)
 - e. Record-keeping. The nurse shall make or keep accurate, intelligible entries into records mandated by law or customary practice of nursing, and will not knowingly make incorrect or unintelligible entries into patients' records or employer or employee records. (3-28-23)
 - f. Diverting or Soliciting. The nurse will respect the property of the patient and employer and not take or divert equipment, materials, property, or drugs without prior consent or authorization, nor solicit or borrow money, materials or property from patients. (3-28-23)
 - g. Professionalism. The nurse must not abuse the patient's trust, will respect the dignity of the profession and maintain appropriate professional boundaries with respect to patients, the patients' families, and the nurse's coworkers. The nurse is not to engage in sexual misconduct or violent, threatening or abusive behavior towards patients, patients' families or the nurse's coworkers. The nurse will be aware of the potential imbalance of power in professional relationships with patients, based on

their need for care, assistance, guidance, and support, and ensure that all aspects of that relationship focus exclusively upon the needs of the patient. (3-28-23)

h. Sexual Misconduct with a Patient. The nurse must not engage in sexual misconduct. For purposes of this rule, sexual misconduct is defined as set forth in Section 18-919(b)(1)-(4), Idaho Code. (3-28-23)

American Nurses Association (ANA) Principles for Social Networking

Students are expected to adhere to the ANA's Principles for Social Networking as listed below, and to apply these principles to all situations, including the classroom and clinical setting. Violations of these principles may result in termination from the Nursing Program.

ANA's Principles for Social Networking

1. Nurses must not transmit or place online individually identifiable patient information.
2. Nurses must observe ethically prescribed professional patient-nurse boundaries.
3. Nurses should understand that patients, colleagues, institutions, and employers may view postings.
4. Nurses should take advantage of privacy settings and seek to separate personal and professional information online.
5. Nurses should bring content that could harm a patient's privacy, rights, or welfare to the attention of appropriate authorities.
6. Nurses should participate in developing institutional policies governing online conduct.

Six Tips to Avoid Problems

1. Remember that standards of professionalism are the same online as in any other circumstance.
2. Do not share or post information or photos gained through the nurse-patient relationship.
3. Maintain professional boundaries in the use of electronic media. Online contact with patients blurs this boundary.
4. Do not make disparaging remarks about patients, clinical facilities, instructors, students, employers, or co-workers, even if they are not identified.
5. Do not take photos or videos of patients on personal devices, including cell phones.
6. Promptly report a breach of confidentiality or privacy.

CEI Nursing Department Additional Standards Regarding Social Media

Improper use of social media may violate state and federal laws established to protect patient privacy and confidentiality. We encourage nursing students to consider whether a social media post is appropriate and if ramifications may come from posting the content. Nursing students:

- Will not post any information and or comments on social media that are defamatory against the CEI Nursing Program or that materially disrupt program operations, violate confidentiality obligations, constitute harassment or threats, or otherwise violate professional or clinical standards.
- Will not post on social media websites any content from or speak on behalf of a clinical site(s), physician(s), staff member(s), or CEI instructor(s).

- Will not make any threatening or offensive comments regarding any instructor(s), other student(s), physician(s), staff member(s), clinical Preceptor(s), or patient(s) on social media websites.
- Will maintain professional boundaries in the use of social media websites.
- Will not post photos, videos, or information of other student(s), instructor(s), physician(s), staff member(s) and patient(s) on any social media websites without proper authority and a signed form for release of information.

CEI Nursing Department Standards on Electronic Devices (cell phones, smartphones, smart watches, laptop computers, tablets, etc.)

1. Students must have access to a computer and the internet every day.
2. Personal electronic devices must be “off” or on “vibrate” in any **clinical sites**. Students will not access their personal electronic devices in any **clinical site** without **explicit approval** from their **Clinical Instructor** or **Preceptor**. When given this **explicit approval**, use of personal electronic devices will be limited to looking up information necessary to assisting with patient care, such medications, clinical conditions, and procedures.
3. If the student is given **explicit approval** from their **Clinical Instructor**, or **Preceptor** if in their Preceptorship, to use personal electronic devices in the clinical site, it will never be done in patient care area, and they must communicate with their **Designated staff registered nurse** to ensure that the **Designated staff registered nurse** understands the purpose of the device use.
4. Use of electronic devices for personal reasons may only be done during breaks. This includes usage in the didactic and clinical settings.
5. During class times, electronic devices may be used to access course-related materials only. Instructors may require students to turn off all electronic devices, (including computers) during class, clinical or labs.
6. Electronic devices will be turned off (NOT put in vibrate mode) and left in a secure place during examinations.
7. Students must receive permission from the instructor or guest speaker before recording course lectures. The student cannot record test reviews done after the close of a test under any situation. This compromises test security. Recording of learning activities such as case studies and practice test questions is at the discretion of the instructor.
8. Students are not allowed to record anything in the clinical/simulation/lab.
9. Students must follow the ANA Guide for Social Networking.
10. Clinical facility policy regarding electronic devices will be followed in addition to the Nursing Department policy. If the clinical facility policy is more stringent than the Nursing department policy, the student must follow the clinical facility policy.

General Standards

CEI College Level Policies

You have the same rights, privileges, and responsibilities afforded to other College of Eastern Idaho (CEI) students. The CEI catalog, website, and student handbook contain vital information to serve as valuable resources to the nursing student handbook. You are encouraged to read and understand the material. You will be held accountable for following the policies established in those publications.

Clinical Site Partner's Standards Effect on CEI Nursing Standards

The CEI nursing programs have agreements with several local healthcare sites (clinical partners) where our students do clinical shifts/rotations. Due to the varying requirements between these sites regarding dress code, immunizations, and other standards, the CEI Department of Nursing standards reflect the most stringent or strict of these requirements. These requirements are re-evaluated at least yearly to ensure they stay up to date with our clinical partners' requirements. Students must know and abide by all standards of clinical partners at which they do their clinical shifts/rotations.

Student Employment

The nursing program will not work around student employment. It is up to the student to adjust to meet the needs of the program, not vice versa. College hours may vary; work schedules should be arranged accordingly. Classroom and/or clinical schedule changes cannot be made to accommodate student work schedules. Inability to meet course and clinical expectations could lead to dismissal from the program.

For patient safety and student protection, it is recommended that full-time students work no more than 24 hours per week. For patient safety reasons, students cannot work a shift immediately prior to a clinical experience.

Students may not practice beyond their current scope of employment practice while at their employment, regardless of facility / peer requests / encouragement. (For example, an RN student who works as a CNA/Student Nurse Apprentice (SNAP) may not start an IV on a patient/other person outside of CEI clinical experiences, even if peers / supervisors say it's okay.)

Student Nurse Apprentice vs. Student Nurse Intern (Idaho)

Student Nurse Apprentice (SNAP).

This may be referred to by different names in different facilities, including Student Nurse Extern

- A nursing student employed in a **non-licensed capacity** by an Idaho Board of Nursing-approved healthcare agency.
- Must be enrolled in good standing in an accredited **Practical Nursing (PN) or Registered Nursing (RN)** program and have completed a basic nursing fundamentals course.
- Works under the supervision of a licensed nurse and performs tasks approved for unlicensed assistive personnel. Can NOT utilize additional skills learned in nursing school in this role. This is for CNA skills only.

Student Nurse Intern

- A nursing student enrolled in an approved **Registered Nursing (RN)** program who is **entering their final year of study**.
- Must work in an **approved acute healthcare facility**.
- Authorized through a letter from the Idaho Board of Nursing and may perform expanded clinical functions under RN supervision.

Both roles require maintaining good academic standing and authorization from the Idaho Board of Nursing. Approval is valid while enrolled and up to three months after graduation.

Religious Expression and Discussion Guidelines for Nursing Students

Purpose

The nursing program respects religious diversity and the rights of students to hold personal beliefs. At the same time, students are expected to maintain professional boundaries that protect patient rights, uphold ethical nursing practice, and sustain positive relationships within clinical learning environments. These guidelines clarify when and how religious discussions are appropriate in academic settings versus clinical practice settings and support the expectations for a licensed nurse in practice. These are CEI nursing department guidelines. In clinical settings with different facility guidelines or policies, the more stringent guidelines will be followed.

Religious Discussion Among Peers (Academic and Non-Clinical Settings)

Appropriate Peer Discussions

In classrooms, simulation labs (outside of patient scenarios), study groups, and informal peer interactions, students may engage in respectful discussions about religion provided that participation is voluntary, conversations are mutual and non-coercive, students do not engage in coercive conduct or unwanted repeated solicitation of religious conversion, discussions remain respectful of differing beliefs or non-belief, and conversations do not interfere with instruction or learning activities. The student should anticipate respectful discussion on the role religion and respect plays in culturally competent care.

Inappropriate Peer Discussions

Religious discussion becomes inappropriate in academic settings when it involves proselytizing,

preaching, or attempts to convert others; pressuring peers to participate in religious discussion or practice; continuing discussion after discomfort is expressed; judging or criticizing another student's beliefs or identity; or disrupting instructional or learning activities. Faculty may redirect or stop conversations that interfere with learning or professionalism.

Religious Discussion in Clinical Sites

General Principle

Clinical sites are professional healthcare environments. Students are guests representing both the nursing program and the profession. Students must prioritize patient-centered care, ethical boundaries, and institutional policies over personal expression.

In the clinical setting, nursing students are expected to always maintain appropriate professional boundaries and function within the scope of their student role. If a student becomes aware of or perceives that a patient has religious, spiritual, or cultural needs or concerns, the student's responsibility is to **communicate those observations to the supervising nurse**.

Students should **not independently initiate, provide, arrange, or act upon religious or spiritual interventions** for patients. Any such needs must be addressed under the direction of the assigned nurse and in accordance with facility policy. This ensures that patient preferences are respected, care remains appropriate and consented, and student actions remain within scope.

Interaction With Patients

Appropriate Conduct

Students may acknowledge and respect a patient's religious beliefs when the patient initiates the discussion; when beliefs are relevant to care, comfort, or decision-making; when the interaction is respectful, non-directive, and supportive; and when care is not delayed or disrupted. Examples include listening respectfully and notifying the nurse if religious needs affect care.

Inappropriate Conduct

Students must not initiate religious conversations with patients; share personal religious beliefs unless directly asked by the patient and with prompt notification to, and deference to the direction of, the supervising nurse or clinical instructor; attempt to convert or influence patient beliefs; use religious language to explain illness, disability, suffering, or prognosis; or pray with or for a patient unless explicitly requested by the patient and permitted by facility policy, with the student notifying the supervising nurse or clinical instructor as soon as practicable; where the student, patient, and supervising nurse or clinical instructor are simultaneously present and all consent, no prior approval is required.

Interaction With Clinical Staff and Instructors

In clinical settings, students should not initiate religious discussions with staff, instructors, or other students during clinical hours. Conversations should remain focused on patient care, learning

objectives, and professional collaboration. Religious discussions may occur only if initiated by staff, are brief and respectful, and do not interfere with care or workflow.

Representation of the Nursing Program

While in uniform or participating in clinical experiences, students represent the nursing profession, the nursing program, and the affiliated clinical site. Any conduct perceived as religious advocacy, bias, or coercion may compromise professional relationships and result in corrective action as defined in and governed by the CEI Nursing Student Handbook and CEI's Code of Conduct.

Handling Religious Concerns or Conflicts

If a student feels uncomfortable with a religious interaction, is unsure how to respond to a patient's religious request, or encounters conflict related to religion in a clinical setting, the student should pause and maintain professionalism, consult the assigned nurse or clinical instructor before acting, and follow facility policy and faculty guidance.

Religious Accommodation Requests

Students who require a religious accommodation, including but not limited to schedule modifications for religious observances, exceptions to uniform or appearance requirements based on sincerely held religious beliefs, or adjustments to clinical assignments based on religious objection, should submit a written request to a Nursing Co-Administrator of the program. The Program will engage in an interactive process to determine whether a reasonable accommodation can be provided without undue hardship to the Program or a clinical facility. This policy does not limit any accommodation rights available to students under applicable federal or state law.

Summary of Expectations

Peer settings allow respectful, voluntary discussion without pressure or disruption. Clinical settings require patient-initiated discussion only, with no religious advocacy. Professional boundaries are required at all times. Failure to adhere to these guidelines may result in corrective action consistent with program professionalism and clinical conduct policies as defined in and governed by the CEI Nursing Student Handbook and CEI's Code of Conduct.

Student Evaluation of Program/Course/Instructors/Clinical Sites

Each semester, students are given a course evaluation to give feedback on the course/instructor and a clinical evaluation to give feedback on the clinical site/areas, Clinical Instructor, and **Preceptors**. The students also complete an evaluation of the nursing program in their final semester of the nursing program. All evaluations are administered through the CEI LMS and are anonymous. CEI and the Department of Nursing use these evaluations in their internal instructor, course, and program evaluation process and for quality improvement.

Student Governance and Participation in Faculty and Course Meetings

The College of Eastern Idaho offers students opportunities to have a voice in college functions through recognized campus student government associations. Representation through the CEI Student Senate and appropriate student groups and committees is encouraged. One campus association specifically linked with the Department of Nursing is the Student Nursing Association at CEI (SNA).

Additionally, Nursing student cohort representatives are selected by their class each semester to attend nursing faculty meetings once per month and share student concerns/comments/suggestions or ask questions. The student class representatives will be provided with scheduled meeting dates, times and location.

Chain of Communication/Command

Students are expected to follow the appropriate chain of communication when they have a question or concern.

Step 1: Start with the Right Person

Students should first speak directly with the person involved, such as:

- Course instructor
- Clinical instructor
- Skills lab or simulation instructor

This conversation should occur face to face whenever possible.

Step 2: If the Issue Is Not Resolved

If the concern is not resolved, students may move up the chain, step by step:

- Course Instructor
- Course Coordinator (if applicable)
- Nursing Co-Administrator
- Dean of Health Sciences (rare circumstances)

Students should not skip steps unless there is a valid reason.

Although face-to-face communication is required, students are encouraged to send a brief follow-up email summarizing the discussion and any next steps.

Communication Channels and Expectations

1. CEI email “*cei.edu*” is the official electronic communication channel between students and faculty. The Nursing Department additionally uses CEI’s **LMS** and/or other communication apps per specific course policy as noted in the course syllabus. Student emails sent from personal email sites may **NOT** be acknowledged.

2. Students are required to check their CEI email daily beginning one week before the first day of classes and continuing through the official last day of each semester in which they are enrolled. During periods when students are not taking classes, they must check their CEI email at least once per week. Additionally, students must respond to emails from instructors, administrators, or staff within 24 hours of the time the email is sent. Since CEI uses email to communicate important and time-sensitive information, it is essential that students remain attentive to their inbox and respond promptly to ensure they do not miss critical updates or deadlines.
3. CEI Nursing faculty office telephone numbers are listed on the CEI homepage directory & the syllabus.
4. CEI Nursing faculty have office hours which are available on the syllabus.
5. Students will be notified of any changes in policies, procedures, or program information using the CEI email and/or *LMS*. The student is responsible for reviewing and adhering to any changes.
6. All communication, whether verbal, nonverbal, or written, is expected to be professional. Effective communication is essential in nursing.
7. Students are required to follow the appropriate chain of communication/command, as detailed in the above section, when they have a question or concern.
8. Co-administrators, the Dean, and instructors may record meetings with students for note-taking and record-keeping purposes. If you would like a copy of the recording, please inform the Co-administrator, Dean, or instructor during the meeting or within 5 business days after the meeting. Any recordings created under this section will be maintained consistent with applicable student privacy laws and College record-retention practices and will only be accessed or disclosed for legitimate educational, administrative, or legal purposes.

CEI Nursing Offices and Phone Numbers

Health Sciences and Trades Senior Coordinator

Building 6 - #201

(208) 535-5437

Nursing Administrative Assistant

Building 6- #201

(208)535-5413

Nursing Program Chair/Co-Administrator

Building 6 - #201B

(208) 535-5391 (best way to contact is through email)

Kirsten.erickson@cei.edu

Advisor Assignments

Students are strongly encouraged to use their Nursing Faculty advisor for general advising. At the start of the program, each cohort is assigned to a faculty advisor for the duration of the program. Faculty are available to assist students as they progress through the CEI Nursing Program.

Nursing Faculty Advisor Responsibilities

The **Nursing Faculty Advisor**, with assistance from **Health Sciences Administrative Staff**, is responsible for the following:

Academic Advising

- Advising students on academic goals, program progression, and course sequencing upon student request.

Cohort Registration Coordination

- Coordinating with the Nursing Administrative Assistant to submit the current cohort list and approved nursing courses for the upcoming semester to ceiadvicing@cei.edu.
- Once received, the Advising Office will register the cohort for the approved nursing courses.

Program Sequencing Guidance

- Providing guidance regarding required course sequencing as outlined in the CEI catalog in effect at the time of program entry.
- Ensuring students understand that:
 - All nursing and general education courses must be taken in the designated sequence.
 - Non-nursing (general education) courses may be taken earlier than scheduled, if desired, but may not be taken later than outlined in the program sequence.

Following the correct sequence is a shared responsibility between the student and the Nursing Faculty Advisor; however, ultimate responsibility rests with the student.

Student Responsibilities

Each student is responsible for the following:

General Education Course Completion

- Registering for and completing all general education courses within the timeline required by their program's scope and sequence.

Monitoring Registration and Requirements

- Verifying that all required nursing courses and prerequisite/corequisite courses are registered for and completed with a minimum grade of C+ by the end of each semester by regularly monitoring their self-service account.

Graduation Requirements

- Assuming ultimate responsibility for meeting all program and graduation requirements.

Health Standards

General Health Protocols

To protect patients, staff, faculty, and peers, students with a fever and/or symptom of infectious disease will not report to campus or the clinical setting. Students will consult with the course instructor prior to coming to campus or with their Clinical Instructor prior to the start of the clinical day in the case of any signs or symptoms of infectious disease. The Clinical Instructor may dismiss a student from the clinical setting if the student poses a safety risk to themselves or patients. Students who develop new signs of illness while on campus or at clinical will be required to notify their course or Clinical Instructor immediately.

Personal Health and Clinical Site Documentation Requirements

Nursing students acknowledge the health risks involved in the pursuit of a nursing career. (See Appendix F: Assumption of Risk and Waiver of Liability for Clinical Education).

As a nursing student, you will be expected to complete clinical experiences at a variety of healthcare facilities, each of which determines its own immunization requirements to protect the health and safety of patients, staff, and students. While the school itself does not mandate immunizations, we are obligated to comply with the policies of our clinical partners. Because the State of Idaho does not regulate clinical eligibility, each facility sets its own standards. To ensure consistency and to meet the expectations of the most rigorous sites, the Nursing Program may establish a standardized list of clinical requirements. You will be informed of any additional requirements before you begin your assigned clinical experiences.

Please note: If you do not meet all immunization requirements set by a clinical partner, this may lead to delays in progressing through the nursing program or failure to complete the program. Possible reasons for delays include:

- **Time Required for Exemptions or Waivers**
Additional time may be needed to submit and receive a decision on any exemption or waiver applications.
- **Limited Availability of Clinical Sites**
There may be fewer clinical sites willing to accept students who lack specific immunizations.
- **Challenges Meeting Program Requirements**
You may be unable to fulfill clinical objectives or complete the required hours.

Clinical experience is a critical part of your nursing education. Failure to meet placement requirements could prevent you from successfully completing the nursing program.

All health documentation and immunization records—including some facility orientation materials—must be entered and completed by students in the designated **clinical interface(s)** as directed by the

Nursing Student Handbook (reviewed/approved 05/2026)

Clinical Coordinator. All documentation and orientations must be completed and submitted by the specified deadlines each semester. The deadlines are as follows:

July 1st for upcoming Fall Semester,

Dec 1st for upcoming Spring Semester

May 1st for upcoming Summer Semester.

New Student Personal Health and *Clinical Site* Documentation Requirements:

Failure to provide adequate clinical eligibility documentation on the ***Clinical interface/s*** by the deadline date may result in inability to attend clinical experiences, course failure, delayed progression, withdrawal, or dismissal from the program unless an extension or accommodation is approved by Nursing Administration for good cause. Health Declaration/Physical Examination Form (part of admission, only needs to be uploaded to the ***clinical interface at the beginning of your program***).

- CEI Approved Background Check
 - An initial background check is required upon entrance into the program. Additional background checks may be required to fulfill different clinical site requirements. Background checks are at the expense of the student. CEI utilizes ***PreCheck*** to conduct these checks.
 - Enrolled students are required to disclose any new misdemeanors, felony charges or convictions, other than minor traffic violations, while in the nursing program. Any new charges or convictions must be reported to the Nursing Administrator within three (3) business days of the occurrence. Depending on severity, new charges may result in dismissal from the program.
- TB Test Documentation
 - Must be current through the last day of the current semester. Expires yearly from date of test results.
 - QuantiFERON-TB Gold Plus Test
 - Chest x-ray (only for positive TB results)
- Measles, Mumps and Rubella (MMR)
 - Documentation of 2 MMR immunizations or positive serology (titer) results indicating immunity.
- Varicella immunization
 - Documentation of 2 Varicella immunizations or positive serology (titer) results indicating immunity.
- Hepatitis B Immunizations and Hepatitis B Titer
 - Documentation of Hepatitis B series (3 shots) and
 - Documentation of positive/ reactive serology (titer) indicating immunity
- Tetanus, Diphtheria and Pertussis (Tdap)
 - Documentation of one injection within the last ten (10) years that
 - Cannot expire until after the last day of the current semester

- COVID-19 Vaccination
 - Documentation of compliance with current CDC guidelines
- Influenza Vaccination
 - One injection with each seasonal year
 - New seasonal shots due by October 1st of each year
- Hospital Required Paperwork & Orientation(s)
 - Due on the date and time designated by the CEI Nursing Department
- Healthcare Provider CPR Certification
 - Must be BLS Provider from American Heart Association
 - Certification must not expire until after the last day of the semester
- Verification of Health Insurance
 - Student must provide a current personal health insurance card. Students will be asked to sign a form verifying and agreeing to maintain personal health insurance while in the program. Any change to health insurance must be reported immediately to the Co-Administrators.
- Signed copy of Signature Form for Department of Nursing Student Policy Handbook (Appendix A)
- Signed copy of Appendix B, C, D, E, F, G, and H, and any other policies and clinical forms as assigned.

If a student does not, for any reason, advance with their original cohort, they must resubmit a new health declaration/physical examination form (Appendix I), as well as complete a new background check.

Continuing/Returning Student Personal Health and *Clinical Site* Documentation Requirements:

Failure to provide adequate clinical eligibility documentation on the ***Clinical interface*** by the deadline date may result in inability to attend clinical experiences, course failure, delayed progression, withdrawal, or dismissal from the program unless an extension or accommodation is approved by Nursing Administration for good cause. .

- TB Test Documentation
 - Must be current through the last day of the current semester. Expires yearly from date of test results.
 - QuantiFERON-TB Gold Plus Test OR
 - Chest x-ray (only for positive TB results)
- Tetanus, Diphtheria and Pertussis (Tdap) – If applicable
 - Documentation of one injection within the last ten (10) years that
 - Cannot expire until after the last day of the current semester
- Influenza Vaccination
 - One injection with each seasonal year
 - New seasonal shots due by October 1st of each year

- COVID-19 Vaccination Booster
 - If the COVID booster is required by our clinical partners, students must complete the vaccination process by the given deadline
- Hospital Required Paperwork & Orientation(s)
 - Due on the date and time designated by the CEI Nursing Department
- Healthcare Provider CPR Certification
 - Must be BLS Provider from American Heart Association or American Red Cross
 - Certification must not expire until after the last day of the semester
- Verification of Health Insurance
 - Students must provide a current personal health insurance card. Students will be asked to sign a form verifying and agreeing to maintain personal health insurance while in the program. Any insurance changes must be uploaded immediately. Signed copy of Signature Form for Department of Nursing Student Policy Handbook (Appendix A)
- Signed copy of Appendix B, C, D, E, F, G, and H, and any other policies and clinical forms as assigned.

If a student does not, for any reason, advance with their original cohort, they must resubmit a new health declaration/physical examination form (Appendix I) as well as complete a new background check.

Physical and Mental Eligibility: Clinical Site Criteria

See CEI Department of Nursing Technical Standards Essential for Nursing Practice in the *Health Declaration/Physical Evaluation Form* (Appendix I) for physical and mental requirements of the program.

CEI nursing program adheres to the guidelines from ADA. Students with any medical or disabling conditions are encouraged to meet with CEI's Disability Resources and Services Office and the Center for New Directions for further information and assistance.

Illness/Unfitness Procedure

1. Nursing students are required to submit a **health declaration/physical evaluation form** (Appendix I) signed by a medical provider before beginning the nursing program verifying the applicant is physically and mentally capable of participating in the nursing program and can perform all the **Technical Standards Essential for Nursing Practice**.
2. If mental/physical concerns occur at any point during the student's enrollment in the program, and these changes negatively impact the student or the learning environment, students must report these changes to their instructor. Instructors may require the student to be seen by an appropriate medical / **mental health provider** to receive an updated **Health Declaration/physical evaluation form (Appendix I)** and/or receive proper medical / mental health treatment to remain eligible to remain in the program.
3. If illness occurs during clinical, the CEI Nursing faculty will determine if the student must leave the clinical facility. The student will be referred to his/her private healthcare provider.

4. A new **Health Declaration/Physical Evaluation form** (Appendix I) must be completed by a **licensed healthcare provider** in cases of severe illness, surgery, post-partum, or injury prior to readmittance to the clinical setting. The CEI Nursing faculty and administration reserve the right to request an updated Health Declaration form at any time. In cases where a medical specialist may give a more accurate clearance, the CEI Nursing Program may request a specialist to perform the evaluation and complete the release prior to returning to the clinical setting. The completed **Health Declaration/ Physical Examination Form** (Appendix I) must specify that the student meets the **Technical Standards Essential to Nursing Practice** and that the student may return to the clinical without restrictions unless specific exemption is given for any limitations by both the Clinical Coordinator and the nursing administrator.
5. If a student experiences repeated or ongoing health-related interruptions that affect attendance, clinical participation, patient safety, or the student's ability to meet the Technical Standards Essential for Nursing Practice, the Nursing Program may require additional medical documentation, evaluate whether reasonable accommodations are appropriate, and determine whether continuation, leave, or withdrawal from the program is necessary. The Nurse Administrator may deny a student re-entry into the CEI Nursing Program. The student will be informed of the reason for denial in writing and will have the right to appeal the decision through the College of Eastern Idaho/ Nursing Department Appeal Process.

Drug and/or Alcohol Procedure

This procedure includes all students accepted or conditionally accepted to the program, students who accepted placement on the alternate list, and currently enrolled students.

1. Entering students must have a negative drug screen. Enrolled students are randomly drug screened each year after acceptance and must have a negative drug screen.
2. A variety of specimen collection methods may be utilized, some of which may include, but are not limited to: blood, urine, hair, saliva, and breath.
3. Random drug screens are scheduled for each cohort as needed by the Department of Nursing.
4. If a student is emailed notice of a random drug screen and does not complete the test by the given deadline, the test, or lack of, may be considered as a failed drug screen.
4. The laboratory, as specified by the Department of Nursing, will conduct the drug/ alcohol screening and provide results to the Nursing Department.
5. Conditionally accepted students/alternates with a positive drug screen may not be allowed to start the program and may have their conditional acceptance rescinded. They must schedule an appointment with the Nurse Administrators to discuss repercussions and possible options, if any.
6. Current students (have started their first day of their first nursing course) who test positive for drugs/alcohol will be deemed unsafe for the clinical setting and will be dismissed from the Nursing Department program. Please see **Consideration for Re-Entry After Failed Drug Screen Procedure** for re-entry steps.

7. Students that test positive for drugs/alcohol and hold an LPN license or CNA certificate may be reported to the Idaho State Board of Nursing and the Idaho Department of Health and Welfare. This includes refusal to test.

8. Students may be randomly drug screened at any time throughout the program without cause. Random drug screens may be done with or without reasonable suspicion. The cost of random drug screens will be at the expense of the student.

Consideration for Re-entry After Failed Drug Screen Procedure

Students with a positive drug screen are not eligible to submit documentation to be considered for re-entry until 8 months after the failed drug/alcohol screen. This timeline may be amended at the discretion of the nurse administrator.

Students who are dismissed from a CEI nursing program due to a failed drug and/or alcohol screening will be considered for readmission by the CEI Nursing Administrator on a case-by-case basis and must submit a letter and success plan to the Nurse Administrator requesting re-entry to the nursing program. The letter must also include the following supportive documents:

- At the discretion of the Nurse Administrator, may be required to provide documentation of participation in, and successful completion of, a verifiable substance abuse rehabilitation program.
- Negative drug screen through CEI-approved source(s)
- New **Health Declaration/Physical Evaluation** form (Appendix J).
- Complete waiver agreeing to repeat random drug/alcohol screens, as often as weekly, at student's expense. Completion of the above items does not guarantee re-entry, as this is decided on a case-by-case basis. If, after review of the above items, the student is considered a possible candidate for re-entry, the student will meet with the Nursing Administrator. After this meeting, a final decision on re-entry will be made by the Nurse Administrator. If the nurse administrator determines that the student is eligible for re-entry, the student will be readmitted in the next available cohort. If there are more students who desire re-entry to the cohort than there are spots available, the Department of Nursing will follow the process for filling those spots as outlined in the **Re-Entry Procedure**.

Clinical Facility Occurrence Report Procedure

Occurrence reports are used by a healthcare facility for risk management and performance improvement. These reports are filled out when an error, accident, or near-miss has occurred (e.g. medication error, injury involving student, client, staff, visitor, etc.). If the occurrence is an injury, in addition to this procedure, the student will also follow the **Injury in the Clinical Setting Procedure**.

If an accident or error occurs in the clinical setting, the student will:

1. Immediately notify the **Clinical Instructor**. If the student is in a Preceptorship, the student must immediately notify their **Preceptor**.

2. Notify the head/charge nurse.
3. Faculty and/or students should assist, if requested by the facility, in completing the **occurrence report** per facility protocol by providing information about the occurrence.
4. Faculty must notify the Coordinator and the Nurse Co-Administrators.
5. Further discuss the occurrence with the Clinical Instructor. If the student is in their Preceptorship, they must discuss this with their **Preceptor** and **Clinical Coordinator**, either of whom may assign subsequent documentation that explains:
 - a. The precipitating events that led to the occurrence.
 - b. How and why the event occurred.
 - c. How the student intends to avoid this situation in future.
 - d. A commitment from the student to prevent this or similar occurrences from happening.

Injury in the Clinical Setting Procedure

The following guidelines outline the process that must be followed should an injury/incident occur in the clinical setting the student will:

- 1) Immediately notify the **Clinical Instructor**. If the student is in their Preceptorship, immediately notify the **Preceptor** and **Clinical Coordinator**.
 - a) If the injury is obviously life-threatening, the student will be seen in the Emergency Room of the facility or by calling 911. The **Clinical Instructor**/or representative of the facility may, in his/her sole discretion, require that the student seek medical attention, and may also require that the student not return to school/clinical until a new **Health Declaration/Physical Examination** form is complete.
 - b) If the injury is NOT obviously life-threatening, the instructor/Preceptor/Clinical Coordinator will require the student to follow clinical facility protocol, and the instructor/Clinical Coordinator may, in his/her sole discretion, require the student to see their personal physician or seek immediate care and follow-up. The Department of Nursing may also require that the student not return to school/clinical until a new **Health Declaration/Physical Examination** form is complete.
2. The student and **Clinical Instructor** will assist in completion, where applicable, of the Facility Occurrence Report, as per **Clinical Facility Occurrence Report Procedure**.
3. The instructor will call campus security so that security may fill out a Security Investigator Report. If the incident occurs on campus, they will come to the site of the incident to interview the faculty and student and fill out the report. If the incident occurs off CEI campus, they will gather information over the phone and may request a meeting with those involved later to finish their investigation/report. If the student is in their Preceptorship, they must coordinate with the Clinical Coordinator regarding notifying security regarding the completion and submission of this report.
4. Students are required to maintain a current Emergency Contact listed in **Clinical Interface**.
5. The college and the clinical facility are not responsible for any claims for expenses that result from an action of a student in the clinical setting.
6. The college is not responsible for student transportation.

Contaminated Needle/Instrument Stick Procedure

- Off Campus: If an injury/needle stick occurs during clinical experience off campus, the student must follow the facility protocol and seek appropriate medical care as advised and follow all other steps as outlined in **Injury in the Clinical Setting Procedure**
- On campus: If while working/practicing in the laboratory or on-campus setting you accidentally come in contact with a needle or instrument contaminated (or potentially contaminated) with another person's blood or other potentially infectious material, the following should be done:
 1. Immediately clean the needle stick or wound area with soap and water, allowing the site to bleed freely.
 2. Report it to the **Clinical Instructor/faculty** as soon as #1 is complete.
 3. The student and/or **Clinical Instructor/faculty** will call campus security so that security may fill out a CEI Campus Incident Report.
 4. Both student and patient (where applicable) must be seen by a physician within 24 hours of the needle stick. If there is chance of blood contamination, we recommend blood tests for HIV, HBV and HCV be drawn at that time and follow-up blood tests be drawn at 6 and 12 weeks after the incident.
 5. Prophylactic treatment will be determined at the discretion of the treating provider.
 6. All records of procedures and information are to be kept in the student's file.

CEI Nursing Uniform Standards

As representatives of the nursing program at CEI, students must maintain a professional appearance. Pride in the uniform and your appearance reflects pride in the profession and institution. It is the student's responsibility to observe dress code standards. Professional appearance is always subject to the approval of the faculty.

Students may not wear any portion of his or her nursing program uniform identifying himself or herself as a nursing student when not in the role of a student.

The nursing student uniform is to be worn when representing College of Eastern Idaho during clinical, simulation, nursing skills lab, classroom instruction, proctored exams (excluding the testing center, where the student must follow testing center standards) and anywhere the student is representing CEI Nursing program.

Any student not following the Uniform Policy will be excused from clinical, simulation, nursing skills lab and/or class by the Department of Nursing Faculty and may receive a failed clinical day.

Uniforms

Uniforms will be clean, odor-free, well-fitting, non-stained, wrinkle-free, and in good repair.

1. Uniform:

a. Scrub tops:

i. Must be approved CEI nursing program color:

* RN program color is Teal

* PN program color is Royal Blue

ii. No T-shirt scrub tops. No ruffles or collars on scrub tops.

iii. Tops must be embroidered with CEI Nursing Program logo embroidered in upper left corner.

iv. Students may wear a plain white or black T-shirt under their scrubs.

v. Depending on the clinical facility, tattoos may be required to be covered.

vi. Optional Scrub Jacket: Must match scrub top color with CEI Nursing program logo embroidered in upper left corner.

vii. Official, unaltered, SNA (student nurse association) apparel, if clean and in good repair, may be worn in lieu of scrub tops for non-clinical experiences. No SNA apparel will be allowed in simulation, skills lab, or off-campus clinical sites. This rule may be rescinded at any time if the faculty feels it is being abused (students wearing apparel other than SNA apparel or wearing SNA apparel to clinical experiences).

b. Scrub Bottoms:

i. Black scrub pants are required. Students may choose the style of scrub pants, provided they are not legging-style. The waistband must sit at the natural waist, and pant hems must not touch the floor.

c. Name Tag: A nursing faculty instructor will set up a time for the class to receive their nursing program name tags from Student Affairs. DO NOT go into Student Affairs and ask for the name

tag on your own. Name tags must ALWAYS be visible and located on the upper left or right side of chest. If the name tag is lost / destroyed notify the Course or Clinical Instructor immediately.

d. Shoes: Clean, conservative, unadorned (no lace or rhinestones) shoes with closed toes and heels.

E. Socks: Socks must be worn with shoes.

f. Embroidered uniforms may be purchased at:

Walkabout Junction

2064 E 17th #1

Idaho Falls, ID 83404

(208) 522-2335

- 2) Uniforms purchased elsewhere may be embroidered, for an additional fee, at Walkabout Junction (address as above).

Other Clinical Equipment

See individual course syllabus for specific clinical equipment needs.

General Appearance

Professional appearance encourages others to trust and respect you as a student. It also allows students to show they value their educational experiences. A few clinical sites may require stricter appearance standards than the standards written below.

In general, professional appearance includes but is not limited to:

1. Daily bathing/showering and effective deodorant. These observances contribute to professional demeanor. Absence of body odor is expected. Odors that may be offensive are not allowed. This includes, but is not limited to: body odor, cologne, fragrant hairspray/ body sprays and cigarette smoke/vape/e-cigarette odors.
2. Any makeup should provide a natural look suitable for daytime use.
3. Hair should be clean and restrained or controlled so it is out of the face and does not hang forward. Hair accessories should be appropriate for a professional look. A head covering will be professional, preferably the same color as scrub top, or a neutral color such as white, black, or tan. Hair color and hairstyles will not be extreme and will have a conservative look appropriate for professional appearance.
4. Facial hair must meet [OSHA guidelines for N-95 masks](#) throughout the program.

5. Nails must be clean and well-manicured and no longer than ¼ inch long. No acrylic/artificial nails and no nail polish.

6. Excess jewelry is NOT appropriate for clinical, simulation, nursing skills lab or the classroom. Piercings cannot be unprofessional or distracting. If a student has gages, discreet flesh-colored spacers must be worn. No necklaces or bracelets may be worn (apart from medical alert jewelry). Rings should be limited to a single wedding band. A watch with a second hand is encouraged. Instructors are the arbiters of professional appearance in any given situation.

7. No gum chewing is allowed during clinical rotations, nursing skills lab or simulation.

8. Depending on the clinical facility, the student may be required to cover any visible tattoos.

The CEI Nursing faculty may require any personal appearance issues to be corrected which are deemed either objectionable or a safety issue regardless of whether it is addressed in this policy.

Late Work Standards

There is no universal Department of Nursing standard regarding late work penalties in the classroom/didactic setting. This is up to the individual instructor's discretion. See individual course syllabi for the instructor's policy for the course.

Being unprepared and/or turning in assignments late in the clinical setting is unacceptable in all courses and may result in failure of the clinical day and/or failure of the course.

Tardiness Standards

Clinical Site *Tardiness*/Time Spent during Clinical

Punctual Attendance is mandatory for all scheduled clinical hours, whether in *skills lab, simulation*, or other *clinical facilities*. For specific skills lab rules, see **Skills Lab Student Handbook**. *Tardiness* and/or arriving unprepared is/are completely unacceptable for clinical experiences and may result in a **failed clinical day** and an administrative **written warning**. Multiple *tardies* may result in **failure of the course** and/or initiation of **Code Resolution Meetings** which may result in dismissal from the program. If the student misses report it will result in a failed clinical day and a written warning.

Clinical hours are provided in various settings, and the experiences gained in each area of these facilities are invaluable to the nursing student's overall education. The **Clinical Coordinator** and faculty assign students to clinical rotations. Students must notify their assigned **Clinical Instructor** before the start of the shift if an absence/tardy is unavoidable. All students must have equivalent clinical hours, as established by the program. If these hours are not met during the current semester, it may result in failure to meet clinical outcomes and failure of the course.

During any off-campus clinical assignments throughout the nursing program, including the Preceptorship, any time away from patient care other than pre-arranged breaks and meals and post-clinical conference, is considered an unexcused clinical absence. This includes arriving late, leaving early, and receiving and making phone calls and texting not related to the care of assigned patients. Students are not permitted to use clinical time to deal with matters related to their work or personal lives. Extenuating circumstances will be considered individually by the instructor/faculty team. Students are not permitted to leave the assigned clinical facility during breaks or lunch. If a student leaves their assigned floor, they must notify their clinical instructor. Students must remain at the clinical site during the entire clinical experience. If a student leaves the assigned clinical facility without **explicit approval** from the Clinical Instructor, Preceptor, or Clinical Coordinator it is considered patient abandonment and failure to complete the assigned role and may result initiation of **Code Resolution Meetings** which may result in dismissal from the program.

Lecture Tardiness

Punctual attendance is expected. See individual course syllabi for further classroom attendance policies.

Attendance Standards

Orientation to the nursing program upon acceptance to the program, and to all courses, skills lab, SIM lab, and all other clinical sites is critical to student performance. Clinical **orientation** (skills lab, sim lab, clinical site orientation) is a part of clinical eligibility criteria to all other clinical experiences. **Non-extenuating absences** from any of these **orientations** (program orientation, course, skills lab, simulation lab, other clinical sites) will result in an administrative warning and may result in additional assignments, failure of the course during the program, or withdrawal of student acceptance to the program in the case of program orientation.

Students must attend all program and course related required activities as published in nursing documents (handbook, syllabi etc). Faculty will not accommodate personal schedules / **non-extenuating** event plans. Any non-extenuating absences from required activities will result in an administrative warning and may affect the ability to complete course outcomes.

Absence from any lecture, labs and/or clinical rotations may result in failure of the course. Please see individual course syllabus for details.

Missed Simulation/ Clinical Procedures and Make-up Options

Missed clinical hours must be made up before the end of the semester in which it was incurred.

Extenuating Circumstances

Students who miss clinical due to **extenuating circumstances** will be allowed the following options:

1. A make-up clinical at the facility if a slot is available for the student or a make-up assignment deemed by the lead instructor of the course. Clinical replacement will be determined by the course instructor and require a minimum of 8-12 hours of outside work for the student. The student's clinical grade for that day will be based upon the assignment rubric and guidelines per course syllabus. Students will have limited opportunities for this make-up assignment or clinical slot.
2. Students who miss greater than one clinical day due to extenuating circumstances may be required to pay a \$350 instructor fee to make up each clinical shift. This option is dependent on the availability of an instructor and student slots at the healthcare facility. The student must meet with the Course Instructor and Clinical Coordinator to see if there are any other options besides course failure.
3. If a student has **extenuating circumstances** and will miss/has missed multiple clinical experiences, they may be required to withdraw.

Non-extenuating Circumstances

A **Code Resolution Meeting** will be initiated for any students who miss a single clinical due to **non-extenuating circumstances**, which may result in corrective action.

Students who miss a single clinical due to **non-extenuating circumstances** may be allowed the following options:

1. Students may be required to pay a \$350 instructor fee to make up the clinical shift. This option is dependent on the availability of an instructor and student slots at the healthcare facility.

Students will need to work with the Course Instructor and **Clinical Coordinator** to see if there are any other reasonable available options besides failure of the course. If there are no other reasonable available options, the student will fail the course.

2. Non-extenuating circumstance

A second absence from clinical during the program due to non-extenuating circumstances will automatically trigger a **Major Code Resolution Meeting**, which may result in failure of the course the clinical is attached to or dismissal from the program.

Excused Absences:

The following situations are the only provisions for “**excused absence**” in the CEI nursing program:

- i. Jury Duty
- ii. Subpoenas
- iii. Military Duty

All requests for an excused absence must be sent directly to the primary course instructor. Students must present absences documentation to the instructor before the absence. Prior arrangements must be made with each instructor for makeup work. If an absence is prolonged and too much content is missed, the student may be given an Incomplete or reassigned to a different cohort. Appropriate documentation is required.

Progression/ Retention Standard

Progression Through the Program

Once admitted into a nursing program, students must complete all course work on schedule unless they receive explicit written permission from the Nursing Administrator. This includes nursing courses and non-nursing courses. The student may take non-nursing courses earlier than specified in the scope and sequence of the program, but not later. All courses must be successfully completed according to the scope and sequence before progressing to the next semester.

If the scope and sequence of any nursing program changes mid program for a student, the student will continue to follow the scope and sequence listed in the CEI Catalog of the Academic Year that the student entered the program. See Program Scope and Sequence in CEI Catalog

If the student does not complete a nursing course for any reason, they will be required to repeat the entire nursing course upon readmittance/retaking the course. No partial course options are available. If the course has both a clinical and a lab component, both courses must be repeated. For example, ARN 240 and 250 must both be repeated if either one of them is not successfully completed. See

Unsuccessful Completion of a Course.

Students must successfully complete the nursing program they are admitted to prior to moving to another program within the nursing department. Failure to successfully complete the program may necessitate a 1 year waiting period prior to applying to another nursing program.

Academic Standards

Consequences for Failure of Course

Due to the rigorous nature of the nursing program, students will be dismissed from the program on academic grounds under the following conditions: if a student fails the same nursing course twice, or if they fail two different nursing courses once each during the program. Similarly, students will be dismissed if they fail the same non-nursing course twice or fail two different non-nursing courses once while enrolled. These policies are in place to ensure academic standards and successful progression through the program

Requirements to Pass a Nursing Course

There are three different requirements the student must achieve to pass nursing courses:

- An overall course percentage of at least 77% is required for each nursing course.
- An exam average of at least 77% is required for each nursing course.
- Earn a “Pass” for each clinical/skill component for each course, regardless of the grade in the theory component. Some courses are Pass or Fail; others require at least 77% for each clinical day. A failure of the clinical component will result in a failure in the course. **

** Only applies to courses with a clinical/skills component. *

Details for determining the course score and letter grade are contained in the course’s syllabus. There are some lab/skills practicing and testing needs for certain course work. Students will need to plan for extra time on campus to complete this work. Participation, cooperation, and a positive attitude are vital in the nursing program and will be considered in the overall grade for classroom and clinical performance.

Midterm and Final Grades

- If a student meets all the requirements (passes all clinical experiences, achieves a minimum C+ in the testing portion, and a minimum C+ overall), the student will receive their grade based on their overall course performance.
- If a student does not meet any one of the requirements (fails any clinical experience, or scores below a C+ in the testing portion or overall course score), the student will receive the lowest grade among the three elements.

Examples:

- If a student has a B+ overall grade but a C- in the testing portion, the student will receive a C- for the course.
- If a student passes the clinical experiences, has a B in the testing portion, and a B- overall, the student will receive a B- for the course
- If a student has a B+ in testing, a B+ overall, but fails their clinical, the student will receive an F in the course.

Nursing Department Grading Scale

| Letter | GPA | Percentage |
|--------|-----|------------|
|--------|-----|------------|

| | | |
|----|-----|-----------|
| A | 4.0 | 93 - 100% |
| A- | 3.7 | 90 - 92% |
| B+ | 3.3 | 87 - 89% |
| B | 3.0 | 83 - 86% |
| B- | 2.7 | 80 - 82% |
| C+ | 2.3 | 77 - 79% |
| C | 2.0 | 73 - 76% |
| C- | 1.7 | 70 - 72% |
| D+ | 1.3 | 67 - 69% |
| D | 1.0 | 63 - 66% |
| D- | 0.7 | 60 - 62% |
| F | 0.0 | 0 - 59% |
| NG | | No Grade |

A grade below 77% is not a passing grade in any nursing course. Grades will be recorded to the nearest tenth of a percent for unit tests. When computing the final testing average from unit tests and the final, there is no rounding up of grades. This means a 76.99999% is not a passing grade in any nursing course.

Didactic Testing Standards

In this handbook, “test” refers to any test, quiz, or examination.

General Testing Procedures

Students must complete assigned tests as outlined in the course syllabi. Tests will be given online and taken through the ATI testing platform except for when there are unexpected testing center closures, or unexpected website or computer issues, or if the instructor feels an alternative testing style is necessary. Nursing schools are highly structured around tests and a student's ability to apply knowledge to situations. The purpose of this is to help prepare students to enter the practicing field and to prepare them to pass the National Council Licensure Examination (NCLEX). Students should be aware of the following:

1. All tests will be taken in the testing center or proctored by an instructor.
2. All tests will be timed.
3. Only one test question will be opened at a time and must be answered before the next question opens.
4. There is no backtracking. Once an answer has been submitted, you cannot go back to the question.
5. Students may use scratch paper in the testing center. ATI provides an integrated online calculator in their testing software. This is the only calculator allowed in the exams. Exceptions for this are exams where over 50% of the content are medication calculation questions. In this case, simple calculators will be provided for the students.
6. Students are responsible for their learning and are required to take all tests.
7. If a student has extenuating circumstances that do not allow them to complete the test within the assigned time, they must arrange with the instructor before the closing test date to complete the test. Exceptions for test dates will only be made with prior approval from the instructor.
8. If a student fails to complete an exam by the closing exam date and prior arrangements have not been made with the instructor, then the student must contact the instructor within 24 hours of the closing date/time for further arrangements to complete the exam. *Any late exam will receive a 25% grade deduction if **extenuating circumstances** are not approved. * If a student fails to contact the instructor within 24 hours after missing an exam, then the student may receive a 0 on the exam and may not be allowed to make up the exam.
9. There are no bonus points given on assignments outside of the test that will be applied to a testing grade.
10. All unit tests and the final exam are calculated in the testing average and recorded to the nearest tenth of a percent. No test score will be dropped.
11. When calculating the overall testing average from the unit tests and the final exam, there is no rounding. This means that 76.999999999% will result in a course failure.
12. If a student wishes to challenge the accuracy of an answer, they must first submit two scholarly sources in writing to the instructor that support their answer. Once these sources are provided,

the instructor will review the challenge to determine its validity. To protect the test, the instructor may need to help frame the question that must be answered to challenge a test question. The instructor's decision regarding the correct answer is final. All challenges to a question must be made within 2 weeks after the test closes, or prior to the final exam, whichever is earlier.

Final Exams

Final Exam Types:

While all nursing exams are taken through the ATI platform, there are 2 distinct types of exams.

1. ATI standardized exams:
2. Faculty created exams taken through ATI platform

Faculty Created Exams through ATI Platform

In addition to ATI standardized exams, all courses may have additional course faculty-created exams. Some courses throughout the program may not have an ATI standardized proctored exam associated with them. If the course does not have an ATI standardized proctored exam associated with it, the course faculty will develop, administer, and weigh a course comprehensive final worth up to 15% of the test average. The grade for these exams will be the percentage that the student achieves on the exam. If the student gets a 79% on the exam, then the grade entered in the gradebook for that final exam will be 79%. There is no remediation and no retake for Faculty created exams.

ATI standardized Exams

1. ATI Standardized End of Course Assessments

ATI Standardized Exams are developed by ATI and consist of well-validated questions. Instructors do not have access to the exact content of these exams, as they are specifically designed to prepare students for the NCLEX. To support student success, practice tests are provided prior to the final exam. Each student has two opportunities to take different versions of the exam and will receive credit for the highest score achieved. These ATI-created end-of-course assessments serve as predictors of student success and help identify both group and individual strengths and weaknesses. ATI competency exams are administered on a scheduled basis throughout the program. Students are required to complete and remediate all ATI practice tests for these standardized end-of-course assessments (and any other assigned ATI practice tests) as outlined by the instructor in the course syllabus. All required practice tests and associated remediation must be completed before taking the proctored ATI end-of-course assessment; otherwise, the student will not be permitted to sit for the exam. If a retake is necessary, remediation must be completed prior to the second attempt. Students are strongly encouraged to remediate after each ATI proctored assessment regardless of their score and to take both available attempts to maximize success.

2. ATI standardized Practice End of Course Assessments (Practice A and B) and Remediation Prior to Proctored ATI standardized End of Course Assessments:

Each ATI standardized practice assessment prior to an ATI Created Proctored end of course Assessment (also referred to as course final exams for some courses) requires remediation regardless of score and must be completed to be eligible to sit for the standardized proctored exam/assessment. Although remediation is required for these practice assessments, it is up to the individual instructor what the remediation entails. At a minimum, remediation should take 1 hour and include notes on critical points missed. See individual course syllabi for requirements for practice exam/assessment remediation.

3. ATI standardized Proctored Exam/Assessments

The ATI standardized proctored assessments are instruments that are used to evaluate a student's current level of knowledge specific to a course and to predict future success on the NCLEX.

In the first year of the full-time and Alternative Schedule RN options, 10% of the test average will be based on this exam. Those ATI standardized tests include Fundamentals and Mental Health. In the second year, 20% of the test average will be based on this exam. Those ATI created tests include Adult Medical Surgical, Maternal Newborn, and Pediatrics.

For the PN to RN bridge option, 10% of the test average in the following courses will be based on the ATI standardized exam: Fundamentals, Pharmacology, and Mental Health. 20% of the test average will be based on the ATI standardized proctored assessment for the following courses: Adult Medical Surgical, Maternal Newborn and Pediatrics (10% for Maternal Newborn and 10% for Pediatrics).

Leadership and Pharmacology will also take the ATI standardized proctored assessment, but these may be given as an assignment later in the program instead of as a final test for that specific course. This is true for all programs and options.

For the PN's 1st semester, 10% of the test average will be based on this ATI standardized proctored exam and in 2nd semester 20% of the test average will be based on this ATI standardized proctored exam. Students are allowed a maximum of two attempts on the ATI standardized Proctored Exam. The student's grade will be the highest of the two attempts.

Scoring for ATI standardized Final Exams:

Level III=100%;

Level II= 85%;

Level I= 77%;

Below Level 1= 50%

A score of Level I or below will require remediation and a retake.

4. ATI standardized Proctored Exam/Assessment Remediation

After completing ATI standardized Proctored Exams, students who score lower than Level II must remediate and re-take a different version of the exam. Remediation requirements depend on each student's ATI score for each exam. ATI exam scores are indicative of student success in the program, as

well as the NCLEX exam. Students with a lower ATI score are required to do more intense remediation. Students who receive a Level II or III on ATI proctored exams are not required to complete a retake but may do so. Students who achieve a Level I or lower will be required to complete the remediation plan outlined below or another remediation plan as agreed upon with the course faculty. Remediation is to be completed 24 hours before the scheduled retake, and faculty must be notified. Students who fail to complete the remediation will not be eligible to take the second version of the ATI proctored exam. Students who fail to complete the second version will receive a score of “0” on the initial exam.

Outline of remediation for ATI Proctored Exams, based upon ATI Levels:

| Score Achieved on 1st Comp Predictor | Recommended or Required | Minimum Review Time Required | Additional requirements |
|---|--------------------------------|-------------------------------------|--|
| ATI Level III | Recommended | 1-hour focused review | For each topic missed, complete and active learning template and/or identify 3 critical points to remember |
| ATI Level II | Recommended | 2-hour focused review | For each topic missed, complete and active learning template and/or identify 3 critical points to remember |
| ATI Level I | Required | 3-hour focused review | For each topic missed, complete and active learning template and/or identify 3 critical points to remember |
| ATI below Level I | Required | 4-hour focused review | For each topic missed, complete and active learning template and/or identify 3 critical points to remember |

5. ATI standardized Proctored Comprehensive Predictor Exam

The final step to completing any nursing program at CEI is taking the ATI Comprehensive Predictor with any required remediation and retake of the exam. This is done as the final required component for ARN 285 or NRS 285. Prior to taking the Comprehensive Predictor exam, students will have completed all other required elements of these courses, including: ATI Comprehensive Predictor practice tests and remediation for these practice tests, completing Virtual ATI, and attending the 3-day Live Review Workshop. In cases of documented extenuating circumstances, an approved virtual NCLEX review may be substituted for the live experience.

While we recommend all students remediate and retake the exam to more fully prepare for the NCLEX, students who do not achieve a 93% predictability score will be required to complete the remediation plan outlined below, or another remediation plan as agreed upon with the course faculty, and take the second exam based on the following schedule:

- Complete and submit all required remediation by Saturday of Week 16 at 11:59 PM, and
- Retake the ATI Comprehensive Predictor on Monday following Week 16.

Outline of Remediation for ATI Comprehensive Indicator, based upon ATI score:

| Score Achieved on 1st Comp Predictor | Recommended or Required | Minimum Review Time Required | Additional requirements |
|--------------------------------------|-------------------------|------------------------------|--|
| 95%+ | Recommended | 1-hour focused review | For each topic missed, complete and active learning template and/or identify 3 critical points to remember |
| 93%+ | Recommended | 2-hour focused review | For each topic missed, complete and active learning template and/or identify 3 critical points to remember |
| 85-92.9% | Required | 3-hour focused review | For each topic missed, complete and active learning template and/or identify 3 critical points to remember |
| Below 85% | Required | 4-hour focused review | For each topic missed, complete and active learning template and/or identify 3 critical points to remember |

We also encourage all students to achieve ATI green light status.

If the student chooses to achieve ATI's green light status, the student must test within 21 days of achieving green light status to have the **ATI guarantee** that goes with green light status. Students who fail the NCLEX after taking the test within 21 days of reaching green light status should notify ATI by email within 3 weeks [mail to:VATIAdmin@atitesting.com](mailto:VATIAdmin@atitesting.com) of the failed test to get additional assistance for free (VATIAdmin@atitesting.com).

National Council Licensure Examination (NCLEX)

It is essential that all nursing graduates pass the National Council Licensure Examination (NCLEX) to become a nurse. The examination is designed to protect the public from nurses who are not safe to practice nursing because of insufficient knowledge, skills and abilities to think critically. The NCLEX tests on higher levels of cognition. Graduation from the nursing program does not guarantee licensure. It is the responsibility of the graduate to complete the NCLEX process. Please contact the Idaho Board of Nursing for specific instructions. Idaho Board of Nursing 280 N 8th St Suite 210, P.O. Box 83720, Boise, ID, 83720 (208) 334-3110 Ext 2478

Nursing Skills Lab/ Nursing Sim Lab/ Clinical Standards

Homework During Clinicals

Nursing students are expected to demonstrate professionalism in all aspects of the program, and this is even more true in the clinical setting. Part of professionalism is giving 100% during every clinical experience. Students must be fully engaged while at clinicals and may not work on any schoolwork not directly pertaining to that clinical experience. Doing so may lead to a failed clinical day and/or a warning.

Recording in Clinical Skills Lab and Sim Labs Standards

There are cameras and microphones in the clinical skills lab and sim lab. These cameras and microphones may be recording at all times. Students must be aware that anything they do and say may be recorded and viewed by faculty and/or administration.

Clinical Rotations, Schedules, and Hours

In CEI's nursing programs, clinical and simulation hours are calculated using time spent on direct patient care and patient care related activities. Lunch breaks are not included. Faculty and the related coordinators are responsible to ensure clinical hours comply with credit/clock hours for each given course. During the RN preceptorship, preceptorship students help faculty track and ensure the required hours are met.

Students will attend various clinical settings throughout the nursing program. Students are not guaranteed a clinical site based upon work schedule or distance from clinical. Students are expected to make proper travel arrangements and accommodations to attend assigned clinical sites. A final clinical schedule will be given to students in the first week of class unless changes need to be made due to unforeseen circumstances. All clinical schedules are subject to change.

Clinical Eligibility Criteria

The student nurse must meet the following criteria prior to being allowed to enter any **clinical sites**, including Sim Lab:

- Successful completion of all courses required in the nursing program curriculum up to that point in the program.
- Successful performance of all Fundamental Nursing Skills, as demonstrated by successful completion of both semester skills pass offs throughout the semester, and successful completion of **Skills Day** at the beginning of each semester. (See description of skills in Skills Lab Manual)
- Successful completion of all course orientation, clinical facility **orientation**, and entrance requirements (see Clinical Interface for specific requirements).
- Successful completion and timely maintenance of all **Personal Health Clinical Site Documentation Requirements** as listed in this handbook and uploaded to **Clinical Interface**.

- Any changes to health status cleared through CEI Nursing Department **Illness/Unfitness Process**.
- All *program fees* must be paid/up to date.

Unsafe Clinical Performance

If an instructor or preceptor has determined that a student has engaged in unsafe clinical performance, that student will immediately be removed from the clinical site, resulting in a failed clinical day and possible failure of the course or dismissal from the program. Unsafe clinical performance will trigger a **Code Resolution Meeting**.

Examples of Unsafe Clinical Performance

This may be one substantive incident or repeated instances of questionable nursing practice which could jeopardize patient care and result in dismissal from the program. Examples of these include but are not limited to:

- Errors related to medication, including but not limited to, lack of knowledge on key concepts in medication administration or knowledge of individual drugs, errors in preparing, errors administering medications, or errors of calculation of dosage, including demonstrated inability to calculate dosages on medication exams.
- Violation of nursing principles resulting in actual or potential patient harm.
- Failure to safely adapt nursing skills to actual patient care.
- Failure to demonstrate adequate preparation for the clinical experience as outlined in syllabi or other course materials.
- Failure to demonstrate sound clinical or professional judgment.
- Performing a procedure without either the required knowledge and/or skill competence or without the guidance of a qualified individual (i.e. the instructor or designee).
- Performing a skill in clinical area without successful check-off completed when required.
- Performing a skill outside the employee scope of practice while working as an employee and not in the role of a student will result in immediate dismissal.
- Willfully or unintentionally do physical and/or mental harm to a patient.
- Dishonesty in the clinical setting including falsification of patient records/charting
- Failure to report errors (or acts of omission) in treatments, assessments, medications, clinical judgment or other components of nursing practice.
- Performing procedures outside of the direct supervision or observation of the preceptor.

Clinical Interface

All Health Documentation/Immunizations, including some facility orientations, must be entered/completed by the student in their **Clinical interface** account. All documentation and

orientations must be current by the date set for each semester for the entire program. The dates are as follows:

- July 1st for Fall Semester,
- Dec 1st for Spring Semester
- May 1st for Summer Semester.

Clinical Preparation and Assignments

Students must demonstrate evidence of preparation for each clinical experience. Students who come to clinical unprepared will be dismissed from the facility due to unsafe practice, which will result in a failed clinical day.

Patient assignments and preparation expectations for the clinical area will be explained and assigned by each course instructor. Students are expected to complete assignments as outlined. See individual course syllabi for further information.

Students are required to bring
as indicated by the instructor in individual course syllabi. Failure to do so may result in the student being sent home and receiving a failing grade for that clinical experience.

Nursing Students as Interpreters

To ensure accurate communication and maintain patient care quality and safety, nursing students cannot act as interpreters for staff in any setting unless they have a recognized interpreter certification, which must be verified and documented with the nursing program administration. Nursing Student Scope of Practice/Clinical Skills

Scope of Practice

CEI adheres to all sections of the Rules of the Idaho Board of Nursing 24.34.01. regarding scope of practice. For further details, and the decision-making model which informs nursing scope of practice, see Rules of IBON 400.01-400.04.

Skills Taught Within the Program

The student may not perform any skills or procedures taught in fundamentals/skills lab in the clinical setting unless they have first been checked off successfully in the skills lab. Once a check off is completed, those skills may only be performed under direct supervision of the Designated staff registered nurse, Preceptor, or Clinical Instructor. Performing a skill that is taught in the skills lab without first being checked off in lab is a violation of the scope of practice as a student nurse which may result in major misconduct violation and may result in dismissal from the program. Students are expected to stay current on all clinical skills taught in the nursing program and to be prepared to show continued competency in the clinical, lab, and simulation settings. All students must retain knowledge of, and proficiency in, completed/checked off nursing skills. They are expected to demonstrate those

skills and competencies throughout the entire program in simulation, clinical, lab, and classroom settings. If a student cannot retain knowledge/ proficiency, a Code Resolution Meeting with them will occur. Repeated documented remediation of those skills may also result in dismissal from the program. See Skills Lab Policy & Procedure for specific guidelines related to Fundamentals courses. Students must be aware of the distinction according to the Idaho Board of Nursing between a Student Nurse Apprentice and a Student Nurse intern, specifically regarding skills that may be done in these roles, and comply with those role distinctions.

Skills Not Taught Within the Program

For skills/procedures that are not taught in fundamentals/skills lab, the student needs to follow the following steps before proceeding with any invasive procedure, procedure that requires an assessment, or any procedure that may result in injury to a patient:

1. Contact their **Clinical Instructor** or **Clinical Coordinator** for approval. The student will NOT be given approval for any skills/procedures that, per facility protocol, requires specialized instruction/certification, for example: arterial line access.
2. After approval is received, the student must receive instruction from their Preceptor or facility educator regarding the skill/procedure.
3. The student may then proceed with the skill/procedure only with **direct supervision** from a Clinical Instructor, Designated staff registered nurse, or Preceptor.

Performing any procedure prior to approval by the **Clinical Instructor** or **Clinical Coordinator**, appropriate instruction, and direct supervision by the Designated staff registered nurse, Preceptor, or **Clinical Instructor** is considered unsafe nursing practice.

Failure to conform to the Nursing Student Scope of Practice will result in a **Code Resolution Meeting** which may result in **dismissal** from the program.

Clinical Groups

Students may not be in a clinical/lab/simulation group with another nursing student who is also an immediate family member. This includes but is not limited to a spouse, sibling, child or grandparent. Clinical Preceptors may not oversee immediate family members in a clinical setting. It is the responsibility of the student to disclose this relationship to the **Clinical Coordinator**. Failure to do so may result in a **Code Resolution Meeting**.

Clinical Performance Grading

Clinical is an opportunity for students to grow and develop as they apply knowledge gained in their classes and skills lab. Patient safety is essential, and certain violations may be grounds for clinical failure immediately. Examples of these violations can be found as outlined under **Examples of Unsafe Clinical Performance**. The student is accountable and required to meet all clinical competencies and outcomes

as described in their syllabus. Students must successfully meet these competencies and outcomes by the end of the semester to pass the course. Students are evaluated in the clinical site by their **Clinical Instructor** and assigned Preceptor. Clinical may be pass/fail or based on a 77% or higher grading system. See individual course syllabi for further grading information.

Clinical Expectations of Students

1. Any communication with the clinical facility must occur through the clinical coordinator or the student's assigned preceptor.
2. Clinical eligibility documentation, drug/alcohol screening, and criminal background check results will be shared with appropriate clinical facilities.
3. Clinical facilities may require an additional background check from students at the student's expense. Clinical facilities have the right to refuse a student based on the results.
4. Students are responsible for notifying the **Course Instructor** and **Clinical Coordinator** immediately of any changes to background or health status.
5. If a student has an emergency/ illness, they must notify their Clinical Instructor of an absence before the start of the clinical day or as soon as notification/ symptoms arise. They must also notify the **Course Instructor** and **Clinical Coordinator** within 24 hours.
6. Students are not allowed to smoke on the grounds of any off-campus clinical facility (including parking lots). This includes vaping and e-cigarettes. Students who violate this policy will be dismissed from clinical, receive a clinical absence which will result in a failed clinical day and must meet with the **Clinical Instructor** and **Clinical Coordinator**. This may result in dismissal from the program.
7. For skills/procedures taught in fundamentals/skills lab, the student may ONLY do those skills/procedures after he/she has had classroom instruction, has practiced, and has been successfully checked off in the nursing skills lab. For skills/procedures that are not taught in fundamentals/skills lab, the student needs to contact their instructor (or Preceptor if in their Preceptorship) for instruction, approval, and supervision BEFORE proceeding with any invasive procedure or procedure that requires an assessment. Performing any procedure prior to appropriate instruction, approval, and/or without direct supervision is considered unsafe nursing practice.
8. Students may not practice outside the scope of a nursing student during clinical experiences.
9. Students are not allowed to take patient transfer reports or verbal or phone orders from a physician or other healthcare provider in off-campus clinical experiences while in their role as a student.
10. Students must report off to their assigned nurse, or charge nurse if assigned nurse is unavailable, before leaving the unit for any reason
11. Students must establish effective communication and working relationships with classmates, faculty, or health team members in providing patient care. Examples include but are not limited to:
 - a. notifies health team of pertinent changes in the client's health.
 - b. effective and appropriate communication with health team members, including faculty, staff members, and peers.

- c. honesty in communication with faculty, or other members of the health care team.
 - d. Insubordination can be considered unsafe practice. It will not be tolerated and may result in immediate dismissal.
12. Students must establish effective therapeutic relationships with patients.
 13. Students are responsible for their own transportation to and from clinical facilities.
 14. It may be necessary to make changes after registration to accommodate the needs of the CEI Nursing Program and/or clinical facility. The nursing program guarantees a clinical experience for all students admitted but there is NO guarantee of specific day, time, method of delivery, instructor or facility.
 15. Students must be able to attend a clinical experience at any of the clinical facilities used by the CEI Nursing Department during ANY semester. Student's personal convenience may not be accommodated.
 16. It is the student's responsibility to notify the CEI **Clinical Coordinator** if they have been banned or denied entry into ANY clinical facility. Failure to report this information will result in **Code Resolution Meetings** which may result in dismissal from the CEI Nursing Program.
 17. Students with an LPN license, CNA certificate or any other medical license or certification that has ever been suspended, revoked, terminated or otherwise modified as to rights and privileges must notify the Nurse Administrator and **Clinical Coordinator** immediately.
 18. If the student is late, for any reason, they must report to the **Clinical Instructor** immediately for instructions.
 19. The student must report to the **Clinical Instructor** any conflicting information between the staff nurse and the **Clinical Instructor** before proceeding with patient care
 20. The student must practice as a Student Nurse (SN) or Student Practical Nurse (SPN) only under the direction of a **Clinical Instructor** or assigned Preceptor during scheduled clinical times.
 21. The student must seek guidance and validation from the **Clinical Instructor** where needed.
 22. The student must demonstrate adaptability to change.

Direct Observation

Direct Observation means that a staff nurse/preceptor (at or above the level the student is being prepared for) physically observes a nursing student performing a specific task, skill, or assessment in real-time during clinical practice. Nursing students should have direct observation during clinical experiences whenever they are performing tasks that require close supervision to ensure patient safety, proper skill execution, and adherence to ethical and legal standards. Some specific situations where direct observation is crucial include:

- **Performing Invasive Procedures:** Any procedures such as starting IVs, inserting catheters, administering injections, or other invasive techniques should be directly supervised to ensure correct technique and prevent harm.
- **Medication Administration:** When students are administering medications, direct observation is necessary to ensure proper dosage, technique, and patient response.

- **Handling Unstable or High-Risk Patients:** Students working with patients who are clinically unstable or require complex care should be under direct observation to ensure that the appropriate interventions are timely and accurate.
- **Situations Requiring Critical Thinking:** For tasks involving rapid decision-making or ethical dilemmas, direct observation/supervision can help guide students in navigating complex clinical scenarios.

These guidelines ensure the safety of patients, promote student learning, and allow for immediate feedback, helping students to develop into competent and confident nurses.

Nursing students may be allowed to perform certain skills without direct observation by a staff nurse/preceptor (licensed at or above the level the student is being prepared for) once they have demonstrated competence and confidence in those tasks and as approved by the staff nurse and/or preceptor. These skills may be performed only if allowed by individual facility policy:

1. **Basic Vital Signs:** Measuring blood pressure, heart rate, respiratory rate, and temperature.
2. **Hygiene and Comfort Care:** Assisting with bathing, toileting, repositioning, and providing oral care.
3. **Feeding and Nutritional Support:** Assisting with oral feedings for stable, non- aspiration risk patients
4. **Basic Mobility Assistance:** Helping stable patients with mobility, including transfers from bed to chair, ambulation, and range-of-motion exercises.
5. **Documentation:** Completing patient charting, progress notes, and recording of observations in the patient's medical record. As allowed by facility policy and reviewed by the staff nurse/preceptor.
6. **Intake and Output Measurement:** Monitoring and recording fluid intake and output, including urine, stool, and emesis.
7. **Practice Assessments:** A nursing student's physical assessment is a learning tool, but it **will not replace** the staff nurse/preceptor's assessment. The staff nurse/preceptor is responsible for the patient's care and must complete their own assessment to ensure all important findings are addressed.

Though these tasks might not always require direct observation/supervision, students are still expected to report any abnormal findings or concerns to the supervising staff nurse/preceptor. The level of autonomy given to students often increases as they progress through the program and demonstrate growing competence in clinical settings.

Supervision of Medication Administration

The level of supervision of medication administration during clinical varies according to the course level of the student and the legal scope of practice. The goal is to ensure the highest quality of patient care

and safety while providing maximum learning experience. Students may be limited in medication administration as specified by the **Clinical Instructor** and clinical facility.

Specific Medication Standards for CEI Nursing Students:

1. Student will demonstrate knowledge of medications to be administered, including action, contraindications, side effects, safe dose, nursing considerations, and patient education prior to administration.
2. Student will verify all medications with the **Clinical Instructor** or **designated staff registered nurse (RN)** utilizing the “Rights” of medications administration *prior* to medication administration.
3. CEI Department of nursing does not allow PN students to:
 - Give any IV push medications except saline flushes.
 - give any medications through, or care for, a central line.
3. Student will NOT administer intravenous chemotherapy agents nor “bolus” epidural infusions.
4. All medications administered by the student will be under direct supervision by the staff RN or the **Clinical Instructor**.
5. Students will NOT administer blood products or serve as the double-check for blood product administration (Fresh Frozen Plasma, Red Blood Cells) regardless of facility policy. Students may monitor the infusion after two RN’s have completed double-check process and started the infusion.
6. For medications that require two licensed nurses to double-check, the student may not serve as either check in this process.
7. In situations where clinical facility policies and CEI Department of Nursing standards conflict, we will adhere to CEI standards unless the clinical facility policies are more restrictive.]

Simulation Policies/standards

Human Patient Simulation

Simulated Clinical Experience (SCE) is an integral component of the CEI Nursing curriculum and is congruent with the student's clinical experience. To preserve the realism of the scenarios used in the Simulation Lab and to provide an equitable learning experience for each student, confidentiality is mandatory. Confidentiality includes information concerning simulated patients and fellow students. Students will be held to the requirements of the Health Insurance Portability and Accountability Act (HIPAA) and any other federal or state laws regarding confidentiality and be expected to apply these standards to the patient care in the simulation lab.

The simulation lab is a learning environment. All scenarios, regardless of their outcome, should be treated in a professional manner. The student(s) participating in the scenario should have everyone's respect and attention. Situations simulated in the lab are to be used as a learning tool and not to be used for humiliation of fellow students. The simulators are to be used with respect and treated as if they were human patients.

Simulation Grading

Simulation scenarios and expectations advance through progression of the program. Students are expected to follow the grading criteria and standards outlined in the individual course syllabus.

Lab Procedures/Standards

Clinical Skills Laboratory Objectives

1. Students will demonstrate safe, professional, and competent fundamental nursing skills of:
 - a. Head to toe assessment
 - b. Vital signs
 - c. IV insertion, discontinuation, and maintenance
 - d. Oral and parenteral medication administration
 - e. Insertion and discontinuation of indwelling catheters
 - f. Nasogastric tube placement, removal, and maintenance
 - g. Basic IV therapy (primary, secondary), (IV push medications – RN only)
 - h. Tracheostomy care
 - i. Central line dressing changes, maintenance, and care – RN only
 - j. Blood transfusion – RN only
 - k. Advanced assessment – RN only
 - l. Utilizing and programming IV pumps
 - m. Obtaining a complete health history – RN only
 - n. Donning and doffing PPE

2. Students will apply the nursing process while performing assessment skills and providing nursing care to clients.
3. Students will practice effective communication techniques to perform client interviews, provide education and comfort to families and clients, inform clients about safe, ethical, and legal practices, and provide effective documentation in a variety of healthcare settings.
4. Students will use evidence-based practice and critical thinking skills to provide safe competent nursing care.

Class Lab Time

Class lab is the time scheduled for the skills lab portion of a course and the designated time for each course is found in the catalog and reflected in the course syllabus. Students are required to be in the lab the full time that their class lab is scheduled. This is to meet the time standards required for credit for the course and to ensure the students have sufficient time to practice and be competent in the skills they are learning.

Open Lab Time

Open lab is a designated time when the skills lab is open for all students to practice skills outside of scheduled class lab sessions. Skills lab instructors will be present during all open lab hours to provide support and guidance. This time is intended to allow students to practice skills independently or with peers and to complete peer pass-offs that could not be finished during class lab time.

Clinical Skills Laboratory Ground Rules

1. Students are required to sign in and out of lab each time they are in open lab (this is not required during class time).
2. There are to be **NO** pens, pencils, markers, betadine, iodine, or any other solutions or ink of any kind near the manikins at any time.
3. Students are **NOT** to move manikins without faculty or an instructor present for any reason.
4. Soiled linens are to be placed in laundry bags. Do not leave linens on chairs, beds, floor, etc.
5. Anatomical models and all manikins must be cared for correctly. Cover with linen if left on beds. Place manikins in proper body alignment. Models are to be cleaned and returned to storage cupboards. Ensure manikins are intact.
6. Use your own supplies. If you need more, talk with the skills lab coordinator, faculty, or instructor present.
7. No equipment is to leave the lab without permission of the skills lab coordinator.
8. Faculty and instructors are **NOT** to sign off faculty/peer signature sheets for students, unless prior approval was made.

9. Before leaving lab, make sure to leave patient care unit with bed down, upper side rails up, linen straightened, manikins back in beds, bedside table over the foot of the bed, etc.
10. All equipment is to be put away in the designated spot before leaving the lab each day. This includes the computers, mouse, and scanners.
11. All equipment and surfaces used must be wiped down with disinfectant Sani-wipes.

General Guidelines

1. Students may bring a friend or family member over the age of 18 to the lab (must schedule time through Teams) to perform live IV sticks and injections. The friend or family member must read and sign a release of liability prior to the skill being performed. All live IV sticks and injections must be directly supervised by a faculty member or instructor.
2. Pregnant students, family, or friends are not allowed to have any live skills completed on them.
3. Students, families, and friends with any medical conditions that may be aggravated or adversely affected by venipuncture or injections are not allowed to have any live skills completed on them.
4. If you come across any broken equipment, please remove it from use and notify the Skills Lab Coordinator at once.
5. All medications (except NS flushes for live sticks and Bacteriostatic NS for injections) used in the lab are for demonstration purposes only; they do not consist of the actual drug.
6. There is no food or drink allowed in the patient care areas (bays or pass off rooms). Drinks and snacks are allowed at the instructional tables in the center of the clinical skills lab.
7. Open lab time is for students to come practice any skills and use the equipment. Please sign up using the Teams Open Lab Schedule at least 8 hours in advance.
8. Please leave the Skills Lab clean and organized before you leave.
9. All skill sheets and skill demonstration videos are available for faculty, instructors, and students in ATI, either in specific Skill Modules or Engage Fundamentals 2.0 modules.
10. Students are expected to come to the lab prepared for the learning experience. This includes reading and completing assignments before the lab period starts. Students should know the care, handling, and proper use of equipment before using it in the laboratory. Students must practice universal precautions in all exposure-related incidents.
11. It is the faculty or instructor's right to decide if a student is safe to perform the necessary skills.
12. All medication carts will be locked at the end of the day.
13. Syringes, needles, and/or medications may not be removed from the lab by instructors, faculty or students at any time, for any reason without prior authorization from the Skills Lab Coordinator.
14. Faculty, instructors, and students using the laboratory should request help from the Skills Lab Coordinator if unfamiliar with any equipment or supplies in the lab.

15. All individuals using the lab are expected to leave the lab in an orderly and clean condition. This includes disposing of trash, cleaning and returning equipment to appropriate locations after each use.
16. Open lab time is for students to come practice any skills and use the equipment. Please see the posted hours available on the Teams Open Lab Schedule.
17. Whenever possible, latex free items are ordered for the Skills Laboratory, however some items within the lab may have latex. It is the individual student, faculty, or instructor's responsibility to tell them if they have a latex allergy or sensitivity and to take proper precautions.

Safety Guidelines

1. Students should practice safe techniques and follow standard precautions while practicing and learning in the skills lab.
2. Needles and sharps used for skills practice are to be used only in the Skills Lab and only when faculty or an instructor is present.
3. It is the student's right to choose not to allow other students to perform live procedures on them. Discuss with your instructor.
4. Wet materials may not be used around electrical outlets or equipment. Faculty, instructors, and students are responsible for reporting any frayed cords, cracked plugs, missing outlet covers, etc., and any problems encountered while using electrical equipment to the Skills Lab Coordinator.
5. Electric hospital beds are to be left in the lowest position.
6. Students should use caution when practicing lifting skills and should not lift any object or another student who is too heavy without help.
7. The equipment used will be kept in good working condition. Any broken parts will be reported at once to the Skills Lab Coordinator, faculty, or instructors.
8. The wheels of all equipment (wheelchairs, stretchers, and beds) are to be locked during practice and return demonstration.

Skills Verification Process

Student review of skill sheets and videos prior to class is required.

All skills will be demonstrated by the faculty or instructors in class.

All skills are evaluated by peers as peer pass offs. Some skills have an additional pass off step, which is the faculty pass off.

Peer Evaluation/Pass Off Procedure:

1. Bring the proper signature sheet to the lab each time. Signatures may NOT be obtained on anything other than the proper signature sheet. If the student comes to lab without the
Nursing Student Handbook (reviewed/approved 05/2026)

signature sheet, they will be considered unprepared and may be asked to leave until they have the proper signature sheet.

2. Practice skill several times independently and/or with a peer until competency levels are achieved. This is done PRIOR to attempting to test the skill with a peer.
3. Peer evaluated skills require a minimum of 3 (three) signatures each. You may NOT obtain more than 1 signature from any one peer without your instructor's prior approval.
4. Each signature represents a time that a peer saw the student successfully complete the skill and achieve the required 91% on the checklist without assistance. 3 signatures mean the student successfully completed the skill 3 separate times without help from skill sheet or peer.
5. Select a peer who will critique you honestly and constructively. Try to work with different peers each time.
6. Students must obtain the signature for the peer evaluated skill, with the accurate date and time of the passoff, immediately after the skill is performed and before they attempt to demonstrate for another signature. If the signature is not obtained at the time the skill is performed, then that practice time will be considered practice and may not receive a signature.
7. All skills must be passed off in the Nursing Skills Lab, with the curtain area open, unless given explicit permission from the course instructor.
8. Be aware that recording is ongoing in the skills lab, and that video for all skills passoffs may be reviewed to ensure completion and that procedures were followed.
9. A skill designated as a peer pass-off only may still require an additional faculty pass-off at the instructor's discretion, with or without cause.

The student doing the peer evaluation (tester) must:

1. Use the checklist sheets provided.
2. Observe closely what the student is doing; place a check in the column for each step.
3. Keep their mouth closed. The peer evaluator cannot give any verbal or nonverbal cues. The student must be able to perform the check-off successfully without any help.
4. If they pass with a 91% or greater, sign and date the signature sheet.
5. If they do not pass it, you will tell them what steps they missed in a polite, professional manner. You may **NOT** sign the signature sheet if the skill was not passed.
6. All peer signatures must be obtained at the time the skill was completed. Signatures may not be done at any time other than at the time the skill is completed. If a student asks you to sign their signature sheet later, you may **NOT**.
7. **NO** peer signatures may be obtained outside of the Nursing Skills Lab. Peer evaluated signatures must be completed by a current CEI nursing student. You may receive signatures from students in other semesters of the nursing program and cross program (RN can sign PN, etc.) if they are a current CEI nursing student.
8. Faculty and lab instructors are **NOT** allowed to sign peer signature sheets unless authorized to do so in exceptional circumstances by the skills lab coordinator.
- 9.

Faculty Observed Skills:

Peer Pass-Off Requirement

- Each faculty-observed skill requires **five peer signatures** before faculty evaluation.
- No more than one **signature** may come from the same peer unless approved by the instructor.

Scoring Requirements

- Students must score **91% or greater** to earn each peer signature and to pass the faculty evaluation.

Second Attempt Process

- If a student does not pass on the first attempt:
 - They may retake the evaluation later.
 - A **25% grade deduction** will apply to the second attempt.

(Example: A second attempt earning 100% will result in a final grade of 75%.)

Maximum Failures Allowed

- Students may fail a maximum of **one skill** twice.
- Failing a second attempt on **more than one skill** in a lab course results in course failure.

Third Attempt Process

- Failing a second attempt triggers an **administrative warning**.
- A third attempt is allowed but carries a **50% grade deduction**.
(Example: A third attempt earning 100% will result in a final grade of 50%.)
- Failure of a third attempt leads to **course failure**.

Faculty Skill Pass Off Process:

Come prepared. The expectations to successfully complete a skill pass off are as follows:

- Obtain the required peer signatures prior to arriving on faculty skill pass off day.
- Students will pass off on specified days for each class.
- Students will be available and ready in the lab when they are called to check off.
- Students will bring with them 2 forms:
 - A clean printed check-off sheet for the skill they will complete.
 - A completed peer signature sheet with designated number of signatures.
 - **If a student does not have both of these forms with them, with their signature sheet complete and ready to turn in, it will be counted as an automatic failure on the first attempt for that skill.**
- Students will receive no prompting from faculty, instructors, peers, videographers, etc...
- Students will be in student uniform with name badge and in adherence to all dress code policies. If a student arrives to pass offs in inappropriate attire including but not limited to; no name badge, not wearing scrub top or bottom, long hair not pulled back, artificial nails or chipped nail polish, or any other violations of the dress code, **the student may be sent home and it will constitute an automatic fail on the first attempt for that skill.**

Failure of Skill During Faculty Pass Offs

- If a passing score is not achieved on the first attempt, the student must:
 - Remediate that skill until competency is achieved.
 - Schedule an appointment with a different instructor to pass the skill within 4 business days
 - Students may be required to complete a success contract.
- If a passing grade is not achieved on second attempt, students will:
 - Be given an automatic administrative warning.
 - Remediate on that skill until competency is achieved.
 - Students may have to pay a remediation fee and remediate 1 on 1 with an instructor for up to 1 hour.
 - Schedule an appointment with a different instructor (who they have not attempted to pass the skill off with) to pass the skill within 4 business days.
 - Only one skill may be attempted 3 times per lab course. If more than one skill is failed twice, it will result in failure of the lab course.
- If a passing grade is not achieved on the third attempt, it will result in failure of the lab course.

Week 1 Skills Day Testing

Students will have 2 attempts at each skill during the scheduled skills day. If the student is unsuccessful on those two attempts, then they will follow the remediation process and receive an administrative warning for each skill failed, including the calculation quiz. If they fail the third attempt, it will trigger a major misconduct meeting for failure to retain skills. The student is not allowed to go to clinicals until the skill is remediated and successfully passed. If any student goes to clinicals without the skill being passed, this is considered unsafe practice and may result in dismissal.

Remediation/Retesting skills:

If any skill is failed:

- The instructor will complete a student success contract with the student, inform the student how and when to pay the remediation fee, and instruct student to schedule remediation with the Skills Lab Coordinator.
- The Skills Lab Coordinator will schedule remediation for the student. In general, remediation is 1:1 time spent with a skills lab instructor. The default time is one hour. The student must pay the fee for this at the cashier's office prior to the remediation.
- After remediation is complete, the instructor completing remediation must complete the remediation form and have the student sign it.
- After remediation, retesting must be done by an instructor who has not been involved either in the remediation or as the tester in a previous attempt at the same skill.

- The skill must be remediated and passed off within 4 days of failure unless the instructor or skills lab coordinator gives explicit and written permission for an extension and the extension does not exceed 2 weeks from the time of failure.

Delay of Program Progress Procedures

Incomplete Course

An incomplete can only be offered in extremely limited and exceptional circumstances in the nursing program. If a student is unable to complete a course within the timeframe of the semester it was started but can complete it by midterm of the following semester, the student may, at the discretion of the instructor and the approval of the Nurse Administrator, on a case-by-case basis, be given an incomplete in the course until it is completed. The incomplete is calculated as a “fail” in the GPA until the course is completed, and then the GPA is recalculated with the completed grade. If the course is not completed in the allotted timeframe, the student will receive a failing grade in the course. An incomplete may not be available depending on class/clinical availability, or other situations. The student may not progress to the next courses in the scope and sequence until the incomplete course is completed. If the course does result in a failed grade, the same procedures apply as in any **Unsuccessful Completion of a Course**.

Exit Interview Procedure

Prior to exiting the program for any time frame, for any reason, the student is strongly encouraged to have an exit interview with the **Nurse Administrator** within ten (10) days of the decision to exit to discuss the re-entry procedure at time of exit. Conditions may be set during the exit interview by the Nurse Administrator that must be met by the student before re-entry. Knowing what these conditions are and being able to plan for them and their completion will aid the student with possible re-entry (see **Re-Entry Procedure**).

To set up the Exit Interview, the student must submit, by email, the completed **CEI Nursing Program Withdrawal Form** (Appendix K) to the **Nurse Administrator**, with a request for the Exit Interview.

Withdrawal

Students may encounter an emergency (health, personal or family situations, other situations) that requires withdrawal from the program.

Students needing to withdraw from the nursing program must follow the approved CEI withdrawal process (see CEI student Handbook) and must additionally complete the **CEI Nursing Program Withdrawal Form** (Appendix K) and submit it to the Nurse Administrator. They are strongly encouraged to meet with the **Nurse Administrator** for an exit interview. See **Exit Interview Procedure**. In any CEI nursing program, withdrawal from any course constitutes withdrawal from the program.

If the student withdraws before the withdrawal deadline, they will receive a “W” for all nursing courses in the semester they withdraw from. If they withdraw after the withdrawal deadline, they will receive whatever grade they earned out of the complete semester’s worth of points at the point of withdrawal. In almost every circumstance, this will not be a passing grade.

If the student desires to be considered for re-entry into the nursing program, they must follow the steps for the **Re-Entry Procedure** and must recognize that these steps should be initiated at the time of the withdrawal with the exit interview.

A student may withdraw from one semester (either one course or all courses) of a nursing program only (and with approval from a co-administrator). Withdrawal from 2 semesters of a nursing program automatically results in dismissal from the nursing program.

Unsuccessful Completion of a Course (Course Withdrawal and Failure)

All students must follow the CEI Course Catalog scope and sequence of their respective educational program, based on the date of program admission.

Students may withdraw from a nursing course or fail a nursing course during the program. However:

- You cannot fail two nursing courses, or fail the same nursing course twice, at any point in the program.
- You cannot withdraw from two separate nursing semesters or from nursing courses from two separate semesters.
 - A semester withdrawal means withdrawing from all nursing courses in that term.
 - Semester withdrawals are only permitted for extenuating circumstances and must be approved by the nursing co-administrators.

Exceeding either limit will result in dismissal from the program.

If a student does not successfully complete ANY one course in the nursing program, the student will be moved to the next cohort with available slots and allowed the opportunity to repeat the course. Although a one-time unsuccessful completion of a course does not remove the student from the program, the student still must follow the steps as outlined in the **Re-Entry Procedure**. Although the student will be allowed to re-enter the program, the timeline for re-entry is contingent on availability of slots. Filling of the available slots will be done in the priority order listed in **Re-Entry Procedure**. If the course is one with both a didactic and clinical component, both courses must be repeated (for example, ARN 240 and 250 must both be repeated if the student is unsuccessful in either course).

If, due to the lack of availability of slots, the student is unable to reenter a cohort in less than one full year (12 months), the student must follow the **12 Month Procedure**. This does not constitute dismissal from the program. The intent is to allow the student to retake the class at the first available opportunity. Although this is not a dismissal from the program, when the student fails a class, they must follow the steps for re-entry to the program to assist in appropriate registration in the class/new cohort and to help ensure future success.

If a student is dismissed for exceeding the allowed number of course failures or withdrawals, they may reapply to the program during the next admission cycle. However, if the dismissal involved a violation of

the Code of Conduct or Academic Integrity Policy, reapplication may not be permitted. Prior to readmission to the program, the student must successfully complete all non-nursing courses with a grade of at least a C+. This is meant to maximize their chances of success in the program. However, re-admission to the program would be both competitive with other applicants, and at the discretion of the **Nurse Administrator**. If accepted to the program, the student would be required to retake all courses in the nursing program, even those previously successfully completed (apart from pre-requisites/co-requisites from outside the program). It would truly be a fresh start.

12 Month Procedure (applies to failed courses, withdrawals, failed drug screens)

Each semester of the nursing program builds upon material previously learned and requires the student to retain the skills and knowledge acquired at those previous levels. Due to this, if the student is away from the program, for any reason, for greater than 12 months, the student must use one of the following procedures prior to re-entry to prove/ensure retained skills and knowledge:

1. Prior to entering a new cohort after an absence greater than 12 months, the student must demonstrate that they have retained the knowledge and skills needed to successfully advance in the program by testing out of all classes from the last semester that was successfully completed, as well as any classes the student successfully completed in the same semester of the failed class (if a class was failed). This includes retaking all course finals (student will need to cover the associated cost) and achieving a minimum of a 77% on course finals/level 2 of any class with an ATI final. The student may also be required to take additional nursing course finals at the discretion of the Nurse Administrator. Additionally, the student must demonstrate any previously learned and/or tested skills of these classes. This may allow the student to reenter a cohort and retake the class even if the timeline is greater than one calendar year. **OR**
2. Restart the program from the first semester. If this happens, the student will be placed in the cohort that results from the next admission process, contingent on the student following the **Re-entry Procedure** prior to the **admission application deadline**, without needing to reapply to the program.

Before **admission application deadline** and selections for each semester, all students that qualify based on the above procedures will be considered for re-entry into the program. Re-entry is accomplished as soon as possible but is dependent upon completion of the above steps and space availability. In the event there are more requests than space available, spaces will be filled in the priority order listed in the **Re-Entry Procedure**.

If the student does not submit a request for re-entry within 12 months of exiting a nursing program, the student must re-apply to the program and, if accepted, will begin the program from the beginning. No priority will be given to any such student over any other qualified applicant.

Re-entry Procedure

Although not mandatory, students who exit the program, for any reason, are strongly encouraged to have an exit interview with the Nurse Administrator within 10 days of the exit to facilitate re-entry (See **Exit Interview Procedure**).

It is the student's sole responsibility to initiate and complete all steps to the **re-entry procedure**.

Eligible students may re-enter the nursing program on a case-by-case basis. Students seeking re-entry must complete the following steps:

1. Be eligible for re-entry (withdrawal, failed drug screen, or failure of one course one time)
2. Submit A **Request for Re-Entry** form to the **Nurse Administrator** within 12 months of exiting the program.
 - a. For withdrawals and failed drug screens the deadline for submission is the new student application deadline for the semester they wish to re-enter.
 - b. For students who have failed one course one time the deadline is within 3 business days of being notified of course failure, or the deadline of the application cycle for the next semester, whichever is later.
3. Attach an unofficial transcript and a written statement detailing how the student plans to be successful on re-entry to the **Request for Re-Entry** form.
4. Meet with the **Nurse Administrator** for a Re-Entry interview. During this interview the student should be prepared to discuss how they have met any conditions set for re-entry made by the **Nurse Administrator** during the exit interview (where applicable) and with specific plans on how they plan to be successful on re-entry. If the student chooses not to conduct an exit interview, conditions may be set during the Re-Entry interview by the **Nurse Administrator** that must be met by the student prior to re-entry. This would require a new Re-Entry interview prior to the student being allowed to re-enter the nursing program.

During the application process of each semester, qualified students will be considered for re-entry. Re-entry is accomplished as soon as possible but is dependent upon completion of the above steps and space availability. In the event there are more requests than space available, students will be selected in the following manner:

- Students who had a passing grade in all courses prior to the withdrawal will receive priority for re-entry.
- The remaining seats will be filled by faculty discretion.

If the student cannot complete re-entry to the nursing program within 12 months, they must follow the 12 Month Procedure.

Students who are unsuccessful in completing the nursing program after having re-entered the program as outlined in the **Re-Entry Procedure**, and who desire to reapply to the program, may do so at the next admission cycle. However, re-admission to the program would be both competitive with other applicants, and at the discretion of the **Nurse Administrator**. If accepted to the program, the student would be required to retake all courses in the nursing program, even those previously successfully completed (apart from pre-requisites/co-requisites from outside the program). It would truly be a fresh start.

If the student does not submit a request for re-entry within 12 months of exiting a nursing program, the student must re-apply to the program and, if accepted, will begin the program from the beginning. No priority will be given to any such student over any other qualified applicant.

This policy also applies to LPNs applying to the LPN to RN bridge program.

Students who have applied to the CEI Nursing Program for re-entry and have been unsuccessful can make an appointment with the Dean of Health Sciences to appeal the decision.

The Nurse Administrator and the Dean of Health Sciences reserve the right to deny re-entry, continued enrollment, or enrollment to any applicant or student.

Corrective/Disciplinary Policies/Code of Conduct or Academic Integrity Code Procedures

Student Success Contracts

Any student who demonstrates difficulty in program progression may be identified for further assistance through a **success contract**. This contract is a formal, individualized, written agreement between the student and program faculty. It outlines the criteria needed for success in that specific course or program, and as such, completion of any success contract may be required to complete the course the success contract is attached to. Faculty initiates the contract for students who show difficulty in areas such as academics, clinical/lab skills, soft skills, or any other nursing program requirements. Students will be evaluated upon completion of the contract to determine whether they have achieved success. Because this action is meant to help the student achieve success in the program, and is not meant to be punitive, there is no limit to the number of success contracts the student may be under/complete during the program, in the faculty's sole discretion.

Steps of the **success contract**:

- **Faculty** will communicate in writing with the student about the area of concern and set up a time to meet with the student to create the **success contract**.
- **Faculty** will meet with the student to develop an individualized plan for student success (create the **success contract**). This is a collaborative process between the instructor and the student.
- The student may agree to participate in the **success contract** by assisting in developing the plan and by signing the written contract.
- If the student chooses not to participate in the **success contract** process a natural result may be failure to complete the course or a **Code Resolution Meeting**, depending on the circumstances.
- At the deadline for contract completion, faculty will re-evaluate the contract and the student and determine whether the contract has been completed successfully. All aspects of the contract will be held confidential.
- Students are responsible for implementing the plan, including arranging referrals for help and additional conferences with their instructor.
- The consequences of failing to meet the goals of the **success contract** will be addressed in the contract and could range from failing a course to a **Code Resolution Meeting**, depending on the circumstances.
- The presence of a **success contract** on an issue does not protect the student from **Code Resolution Meetings** if additional incidents occur.

Written Warnings

Written warnings can be given as an outcome of a **Code Resolution Meeting** and may be utilized for students who demonstrate noncompliance or need remediation in areas such as professionalism, clinical, lab, simulation performance and policy violations. **Written warnings** are formal, individualized,

written warnings between the student and program faculty. If a student receives three **written warnings** per program, it will trigger a **Major Misconduct Code Resolution Meeting** that may result in **dismissal** from the program. Depending on the severity of the violation, **Faculty** reserves the right to escalate the warning to a more severe measure, up to and including a **Major Misconduct Code Resolution Meeting**, which may result in dismissal from the program.

Administrative Written Warning

A subset of a written warning is an administrative written warning, which counts as any other written warning with regards to 3 written warnings triggering a Major Misconduct meeting. These warnings may be issued without a code meeting by the Nurse Administrator, or her designee in the following circumstances:

- Failure to meet compliance deadlines
- Failure to attend mandatory orientations
- Failure to pass skills after two attempts with different instructors, or failure to maintain ability to perform previously passed off skills as demonstrated to two failed attempts with different instructors on skills day.
- Failure to attend a clinical day (simulation lab or clinical) due to non-extenuating circumstances.
- Missing any other deadline as stated in published nursing documents (syllabi, handbook, etc)
- Other obvious violations of standards of the Nursing Student Handbook.

If a student wishes to challenge any administrative warning, they may request a full code procedure by emailing both Co-Administrators and cc-ing the person who sent the administrative warning. This will trigger a full code process starting with the letter of notification.

Code of Conduct or Academic Integrity Resolution/Corrective/Disciplinary Procedure

Any demonstration of unprofessional behaviors and or violation of handbook, course syllabi, clinical requirements, and/or professional guidelines may result in the initiation of a Code of Conduct or Academic Integrity **Code Resolution Meeting**. Notice of these alleged violations and meetings regarding them will be communicated through Maxient via the student's CEI email. If a student receives a notification from Maxient, they must access it by inputting their student ID number. There may or may not be a leading 0.

Student Responsibilities

All students in the Department of Nursing are responsible for following CEI's Code of Conduct, CEI's Nursing Student Handbook, and CEI's Academic Integrity Code. Violations of any of these codes or standards may result in corrective/disciplinary proceedings under either the Code of Conduct (for Code of Conduct or Nursing standard violations) or under the Academic Integrity Code.

Investigatory Meetings Prior to Notice of Complaint

The nursing programs follow the procedures of CEI's Code of Conduct and Academic Integrity Codes but adds the following Nursing Program Code Specification: An instructor may, in their sole discretion, decide to have an initial investigatory meeting with the student involved prior to sending out a Notice of Complaint in order to gather information to see if a more formalized Code Resolution Meeting is indicated.

Code Decision Maker

For all Code of Conduct or Academic Integrity Code allegations involving **Lesser Misconduct**, the lead instructor of the class involved will be the default Code Decision Maker.

For all Code of Conduct or Academic Integrity Code allegations involving **Major Misconduct**, the **Nurse Administrator** will be the default Code Decision Maker, as the automatic designee of the Dean of Health Sciences.

General Code Procedures

Once a Major Code Resolution Procedure has been initiated, an **academic hold** will be placed on the students' record, and the student will not be allowed to withdraw during the Code Resolution/Appeals process.

If, as a result of the Major **Code Resolution Meeting**, a student is dismissed and decides to appeal the decision, once the appeal letter is submitted the student may attend classes and take tests, including final exams, (unless there is a safety issue to do so) while going through the appeals process until a final decision has been made.

The faculty member, in his or her full discretion and with approval from the **Nurse Administrator** or **Clinical Coordinator**, may remove the student from any situation where patient care is given (specifically, but not limited to, hospital clinicals) while the incident is being investigated and until any applicable appeals process is complete. This is particularly pertinent if the suspected infraction demonstrates either a lack of judgment, knowledge, or nursing skill which could cause harm to others. Examples of this include but are not limited to:

- Not being able to perform any clinical skill to standard.
- Performing a skill that has not been passed off in skills lab without explicit education, permission, and direct supervision.
- Not being able to administer medications safely, including, not following the "rights" of medication administration. This includes not being able to correctly calculate medication dosages and not fully understanding the appropriateness of any medication given.
- Not communicating appropriately with those they work with, including instructors, healthcare facility staff, patients etc. This can include issues such as not being able to perform appropriate patient education, not communicating patient safety information with staff and instructors.

- Demonstration of unwillingness to take accountability for actions. For example, nurses must complete incident reports for any errors/unforeseen incidents in hospital, even when it does not result in problems for the patient. A nursing student must demonstrate willingness to admit to/take accountability for any errors.

Dismissal Procedure

If a student is dismissed from the CEI nursing program for a code of conduct or academic integrity issue, the student will be withdrawn from all courses and “W’s” will be placed as a grade for each course. If the code of conduct or academic integrity issue is linked to a specific nursing course, an “F” will be issued in that course and “W’s” would be issued for all remaining nursing courses.

Examples of Reasons for Failure of Course and/or Dismissal from Program

Following a Major Code Resolution Procedure, a student may be dismissed with cause from the program at any time, regardless of academic grade. Reasons include, but are not limited to:

1. Any act that is harmful or potentially detrimental to a patient.
2. Unsafe practice or unsatisfactory performance in the clinical/simulation area.
3. Performing invasive nursing skills without direct supervision from instructor or Preceptor in a clinical, lab, home, or work setting.
4. Exhibiting false and/or fraudulent behavior.
5. Actions which result in a facility’s request for termination of student clinical experience.
6. Failure to successfully complete assigned remediation.
7. Violation of policies/standards and procedures.
8. Failed Drug or alcohol screening, substance abuse.
9. Lack of accountability for actions and/or demonstrating a lack of improvement from prior learning opportunities.
10. Lack of completion of student warning contracts.
11. An overall grade or test average below 77% in any required course results in course failure.
12. Failure of any two (2) courses in the program, or the same course more than once, results in program dismissal.
13. Failure to maintain required clinical and program documentation.
14. Failure to submit required paperwork/documentation by deadline.
15. Falsifying/misrepresenting documentation/logs
16. Failure to report new criminal convictions, probation, or legal restrictions to Nurse Administrator within three (3) days.
17. Participating in skills not previously passed off or without instructor permission.
18. Academic dishonesty (see Academic Integrity Code).
19. HIPAA violation
20. Frequent Absences/Tardies
21. Unprofessional communication/insubordination
22. Failure to accept responsibility for actions

23. Inability to perform skills to CEI standard.
24. Inability to work independently or with a group
25. Any other lack of professionalism.

Appeals

In the case of dismissal from any Nursing Program, any request for an appeal will generally be directed to the Dean of Health Sciences. See CEI's Code of Conduct and Academic Integrity Code for further details.

CEI Formal Complaint and Grievance Procedure for Students

All CEI students follow the same process for formal complaints and grievances. This process is found in the CEI Student Handbook at:

<https://www.cei.edu/student-handbook-policies>

under "General Complaints/Grievances".

Program Completion

Pinning Ceremony

The pinning ceremony is a long-held nursing tradition, signifying the educational program's culmination. This ceremony is a welcoming of students into the professional field of nursing and a celebration of the achievement of the completion of the nursing program for the graduates and their loved ones. Students are expected to behave appropriately and respectfully during this solemn event.

The ceremony is held at the end of each semester. It is not required to attend but is strongly encouraged. A specific date for the ceremony is determined by the Nursing faculty. The attendance is limited to the graduates, the graduates' guests (varies by circumstances), faculty, and school administration. The dress code for this event is decided by the graduating cohort but suggested to be semi-formal dress. The planning for the program is done by the graduating cohort, assisted by the faculty advisor of the graduating cohort. Traditionally, each graduating cohort chooses and invites a member of the graduating cohort to speak and provides a video slideshow of their cohort. Additionally, each graduate picks one (1) person of their choice to pin them. This may be a significant other, parent, child, faculty member, or anyone else the graduate feels appropriate. The costs for the ceremony are the responsibility of the graduating cohort. The faculty will provide the decorations, pins, and the written program, after the graduating cohort has completed the template.

Graduation Requirements

To graduate from the nursing program, the student must complete all requirements as stated in the CEI catalog for the appropriate program. General graduation requirements and procedures are found on the CEI website.

Graduation Ceremony is held once a year for all students who graduated that academic year. It is usually held in the 2nd week of May. It is not required to attend but is strongly encouraged.

References:

This Nursing Student Handbook was adapted from PIMA Community College's Nursing Student Handbook.

American Nurses Association. (n.d.). Code of Ethics for Nurses with Interpretive Statements. Retrieved from <https://www.nursingworld.org/coe-view-only>

American Nurses Association. (n.d.). Principles for Social Networking and the Nurse. Retrieved from <https://www.nursingworld.org/social/>

National Council of State Boards of Nursing. (n.d.). A Nurse's Guide to the Use of Social Media. Retrieved from https://www.ncsbn.org/NCSBN_SocialMedia.pdf

Rules of the Idaho Board of Nursing. Retrieved from <https://adminrules.idaho.gov/rules/current/24/243401.pdf>

Glossary

Admission application deadline: Deadline at which applications for new admissions to the nursing programs must be submitted. This is the same deadline used for most re-entry students. See CEI nursing website for deadlines.

ATI guarantee: If a graduate receives the Virtual-ATI “green light,” tests for NCLEX within three weeks of receiving the “green light”, and fails NCLEX, an additional 12-week access will be offered at no additional cost. For the guarantee to apply, graduates must notify ATI in writing of their unsuccessful attempt within three weeks of receiving their NCLEX score.

Clinical Coordinator: Nursing faculty whose duties include helping ensure all paperwork is uploaded from students and clinical faculty in clinical interface, being the liaison between clinical facilities and the college, creating clinical schedules for each clinical rotation, assigning final semester students to Preceptors each rotation and making visits to students during their Preceptor clinical, working with educators at facilities to ensure adequate slots for all clinical placements each semester, attending and arranging for new student orientations at each facility, and keeping all clinical affiliation agreements signed and current with clinical agencies.

Clinical Facilities/Sites: hospital or other healthcare related sites where the nursing student is given the opportunity to practice their clinical skills and develop nursing judgement in real or realistic settings. This includes, but is not limited to, hospitals, doctors offices, community care or urgent care centers, public health centers, dialysis centers, and, within CEI campus, the skills lab and sim lab.

Clinical Instructor: Registered Nurse employed by CEI and who teaches the clinical component to a didactic course. They may teach students in a hospital, home care, or community setting. A clinical nurse instructor works with students in a clinical environment to give them real-world training and enhance classroom education.

Clinical Interface: a web-based application that assists in the request, approval, scheduling, and compliance process of nursing students. The application may be accessed by Hospitals, Students, and Oversight Users such as CEI Clinical Instructors or the CEI Clinical Coordinator - each with their own unique level of "need-to-know" access. An example of a clinical interface is myClinicalExchange.

Code Resolution Meetings: process that is initiated when a complaint is alleged against a student for violations of CEI’s Code of Conduct (or the standards in the Nursing Student Handbook), or CEI’s Academic Integrity Code. Outcomes of any code violations may include, but are not limited to, dismissal of the complaint if found unwarranted, student warning, course failure, and dismissal from the program depending on the severity of the violation and aggravating or mitigating factors. See CEI website for specifics on these proceedings.

Code Violation: where a student is found to have committed a violation of CEI’s Code of Conduct, CEI’s Academic Integrity Code, or have violated standards of the Nursing Student Handbook. Any violations of the Nursing Student Handbook, with the exception of those obviously under the umbrella of Academic Integrity, will follow the proceedings of CEI’s Code of Conduct.

Designated Staff Registered Nurse: Nurse employed by clinical site that is designated to work with a particular student for a particular day/time.

Direct Supervision: The responsible person (*Designated staff registered nurse*, Preceptor, or Clinical Instructor) is physically present in the room to supervise the activity of the Student Nurse.

Dismissal: Removal from the nursing program. This may be the result of more than one failed course, or as a result of a major code violation.

Excused absence: absences for reasons protected by law or statute.

Explicit approval: approval or permission that is fully revealed or expressed without vagueness, implication, or ambiguity: leaving no question as to meaning or intent

Extenuating Circumstances: any circumstance that causes tardiness, absence, or late or missed assignments for reasons that are considered justifiable or valid by the nursing program. Any consequences of extenuating circumstances are considered on a case-by-case basis. Examples include, but are not limited to:

- a. Death of immediate family member
- b. Documented illness- must have appropriate documentation by healthcare provider to be considered an extenuating circumstance.
- c. Documented Accident
- d. Severe documented family illness

Faculty: didactic teaching or academic staff at CEI.

Failed Clinical Day: Clinical day that is failed per the clinical or sim grading rubric, or through unprofessional or unsafe practice. If a student has a failed clinical day, they must successfully pass a makeup clinical day to pass the associated course. Due to limited clinical day availability for makeup clinicals, the student may fail the associated course with one failed clinical day.

Failure of the course: Unsuccessful completion of a course. This may be the result of failure to successfully complete up to standard the didactic portion of the course, the testing portion of the course, or the clinical portion of the course. This can also be the result of a Code Resolution Meeting. Failure to complete one course one time does not result in dismissal from the program. Failure to complete one course twice, or two or more courses one time will result in dismissal from the program.

Health Declaration/Physical Evaluation Form: Form that must be completed and submitted prior to entry to the nursing program, and at various times, as stated in the student handbook, must be re-completed and re-submitted. The form must be completed by a licensed provider. The form asks that the licensed provider complete a physical examination that indicates if the nursing student will be able to complete safe and efficient care in the program and additionally asks them to declare if the student can perform all the Technical Standards Essential for Nursing Practice.

Licensed healthcare provider: for the purpose of this handbook, the definition of the licensed healthcare provider will be limited to an MD, DO, NP, or PA.

Licensed Mental Health Provider: professionals who diagnose mental health conditions and provide treatment. For the purpose of this handbook, they must have at least a master's degree with training and credentials in the area of mental health. This includes psychiatrists, psychologists, psychiatric-

mental health APRN's (advanced practice registered nurses), LCSW (licensed clinical social worker), LPC (licensed professional counselor).

LMS: A learning management system (LMS) is a software application for the administration, documentation, tracking, reporting, automation, and delivery of educational courses. Examples include Canvas, BlackBoard, etc.

Major Code Resolution Meetings: process that is initiated when a major complaint is alleged against a student for violations of CEI's Code of Conduct (or the standards in the Nursing Student Handbook), or CEI's Academic Integrity Code. An outcome of any major code violations may include dismissal from the program depending on the severity of the violation and aggravating or mitigating factors. See CEI website for specifics on these proceedings.

Non-extenuating circumstances: any circumstance that causes tardiness, absence, or late or missed assignments for reasons that are not considered justifiable or valid by the nursing program. Examples include, but are not limited to:

- a. Family planned vacations
- b. Weddings
- c. Oversleeping
- d. Forgetfulness
- e. Non-documented illness
- f. Tardiness to clinical
- g. Unprepared for clinical rotation

Nurse Administrator: The nurse with responsibility and authority for the administrative and instructional activities of a nursing education unit and nursing programs within the governing organization (at CEI this is the Chair of the Department of Nursing).

Occurrence Report: report in and by a clinical facility that assists in identifying care or safety conditions that may result, or has resulted, in an injury to a patient or staff, or visitor.

Orientation: meeting where instructors educate/inform students on all necessary aspects of a program, course, or clinical setting. This may include introduction to other students and instructors, physical location and facilities, expectations and responsibilities of students, facility/course/clinical rules, paperwork, etc. All orientations in CEI nursing programs are mandatory, not optional.

Preceptor: A Preceptor is an experienced licensed clinician who supervises nursing students during their clinical rotations. At CEI, this term is sometimes used in lieu of designated staff registered nurse. In the final semester of the RN program, this term is used for the designated staff registered nurse that the student is with for their Preceptorship rotation, or a Preceptor's assigned designee.

PreCheck background check: All CEI nursing program background checks must be conducted by PreCheck, Inc., a firm specializing in background checks for healthcare workers. This company has been agreed upon by the CEI nursing programs and all clinical sites. Your order must be placed online through StudentCheck. See CEI nursing program website for further information and instructions. Criminal background checks are necessary to meet clinical practicum site requirements during College of Eastern

Idaho's (CEI) Health Professions programs and to ensure safety and well-being of clients and coworkers. Results of the background check are confidential and retained by the Nursing Program at CEI. Background checks are also sent to the required clinical facilities and kept confidential under their student records. An abnormal background check may require further review with the student and also the clinical facilities in order to maintain placement in the nursing program.

Program Fees: In addition to tuition, nursing students must pay additional fees. These fees include, but are not limited to, disposable supply fees, liability malpractice insurance fees, drug testing fees, simulation fees, ATI fees, and clinical interface fees. Because nursing students must have malpractice insurance prior to entering the clinical site, all fees must be paid prior to entering any clinical site.

Simulation lab: A safe, contextual learning environment that helps the student develop problem-solving and clinical reasoning skills across the continuum of care through simulation lab scenarios in which the student either treats a high-fidelity simulation manikin that delivers vocal responses, or an actual person specially trained to help you learn, often referred to as a standardized patient.

Skills day: Day at beginning of each semester (except first semester) where students must pass off previously acquired clinical skills and a dosage calculation exam to prove retained competency prior to attending any clinical site.

Skills lab: A safe, controlled environment equipped with task trainers, full-body manikins, and hospital equipment, which sets a realistic stage for learning and clinical practice. A place where you can ask questions and safely hone your skills without the fear of harming a patient.

Success Contract: formal, individualized, written agreement between the student and program faculty that identifies an area of concern in a course or program, and identifies strategies to overcome that problem area to aid the student in being successful in that specific course or program,

Tardiness: arriving after the time specified for attendance

Technical Standards Essential for Nursing Practice: Technical standards that detail the physical, cognitive, and behavioral abilities required for satisfactory completion of all aspects of the nursing program curriculum and clinical agency requirements. These standards are listed in the Health Declaration/Physical Evaluation Form.

Unprepared: being present without materials/tools/ knowledge needed to successfully complete required activities.

Unsatisfactory Clinical Performance: performance in any clinical site that results in unsatisfactory scores on the clinical or simulation grading rubric. This will necessitate either a completed remediation in order to pass the clinical day or may result in a failed clinical day.

Written Warning: are formal, individualized, disciplinary written warnings between the student and program faculty that are a result of a lesser code violation, including violations of the Nursing Student Handbook.

Appendixes

Appendix A: Nursing Student Handbook Acknowledgement Form

Please read, initial, and sign below that you have read and understand each of the following statements:

- _____ 1. I have read, I understand, and I agree to comply with the information in the Department of Nursing in the Health Care Division Nursing Student Handbook.
- _____ 2. I understand that I am also responsible for information contained in the hyperlinks within the Nursing Student Handbook.
- _____ 3. I understand failure to comply with or meet stated policies, standards, and procedures may result in disciplinary action, which could include dismissal from the program.
- _____ 4. I also understand that these policies, standards, and procedures are occasionally revised and that I will be informed on/or before the time of implementation of any change.
- _____ 5. I understand that it is my responsibility to review and comply with all updates throughout my tenure in the nursing program.
- _____ 6. I also agree to have the clinical and lab schedules released to participating facilities and fellow classmates.

Student Printed Name

Student Signature

Date

Appendix B: Authorization for Release of Information

Name _____

Date _____

Student ID# or SSN _____ Phone _____

Address _____ City _____ State _____ Zip _____

I, (print name) _____ authorize College of Eastern Idaho to release the requested information to any and all clinical and preceptor sites I attend during my CEI Health Care Program.

This includes but is not limited to the following information:

- o Background check
- o TB test
- o Immunizations
- o Drug & Alcohol test
- o CPR card

I give permission to the College of Eastern Idaho to release the specified information to all clinical and preceptor sites through the duration of my time in the nursing program. I understand that this information is considered part of a student education record. Further, I understand that by signing this release I am waiving my right to keep this information confidential under the Family Education Rights and Privacy Act (FERPA). I certify that my consent for disclosure of this information is entirely voluntary. I understand this consent for disclosure of information can be revoked by me in writing at any time, but will not affect the information released under my previous consent. If I wish to make any changes to my consent for release, I understand I will need to complete and file a new form.

Student Signature _____ Date _____

Printed Name _____

Appendix C: Consent and Release of Liability for Skills Lab

Date: _____

1. I, _____ consent to the performance of venipuncture and/or injection on myself.
2. I understand that the procedures are to be performed at College of Eastern Idaho, a teaching institution, utilizing Universal Precautions.
3. I understand that the procedures are to be performed by a student in the CEI Nursing Program and that the student will be supervised and observed during the procedure by a nursing instructor or skill's lab employee at the College of Eastern Idaho.
4. In agreeing to participate with these procedures, I am fully aware that there may be associated risks involved, to include possible hematoma (bruise), vasovagal syncope (fainting) which occurs only occasionally, and possible muscle soreness. I acknowledge that if I lose consciousness while on campus, campus security and 911 will be contacted immediately. I understand that if I am medically stable and able, I may decline transport after being evaluated by emergency responders. I also understand that any costs associated with emergency response or medical transport are my responsibility, regardless of whether transport is accepted or declined.
5. Being fully aware of such possible risks, I hereby assume all risk of such injury, and hereby release College of Eastern Idaho, their employees, agents, and students from and against any and all liability for any harm, injury, damage, claims, demands, actions, causes of actions, costs and expenses of any nature that I might have or that may hereafter accrue to me, arising out of or relating to any such injury that may be sustained by me as a result of the services provided by the CEI Nursing Program.
6. I affirmatively state that I have no illness or health condition which might be aggravated or otherwise adversely affected by any of the procedures mentioned herein and performed in the CEI Nursing Program. I understand and agree to immediately report any change in my health status to one of the Nursing CO-Administrator.
7. I further certify that I am of lawful age (18 years or older) and otherwise legally competent to sign this agreement.

Signature

Date

Witness

Date

Appendix D: CEI Nursing Program Verification of Personal Health Insurance

Please read, initial, and sign below that you have read and understand each of the following statements:

- _____ 1. In order to participate in any nursing course at CEI, I will carry personal health insurance.

- _____ 2. By signing this verification, I am stating to the Nursing Department and Clinical Agencies that I have personal health insurance.

- _____ 3. Falsification of this document may result in my being terminated from the CEI Nursing Department.

Print Name: _____

Date: _____

Signature: _____

Beginning Semester: _____

Appendix E: CEI Nursing Department Scheduling Procedure

Please read, initial, and sign below that you have read and understand each of the following statements:

- _____ 1. Schedules for CEI Nursing courses (Lectures, laboratory, clinical, or simulation) are established at the discretion of the Nursing Department. Individual student requests for schedules cannot be honored. Nursing schedules are dependent on clinical site and instructor availability and are subject to change.

- _____ 2. It is the student's responsibility to notify the CEI Clinical Coordinator and Nurse Administrator/Chair if they have been banned or denied entry into any clinical facility used for instruction by the Nursing Program.

- _____ 3. I also understand that this statement applies to all semesters/courses in the Nursing program.

Student Name: _____ Student ID #: _____
Student Signature: _____ Date: _____

Appendix F: Assumption of Risk and Waiver of Liability for Clinical Education

Participation in clinical education, including clinical simulations and skills lab time in didactic settings, is required by professional accreditation standards for health sciences programs. Any placement in a healthcare facility (including hospitals, clinics, long term care facilities, or other such entities) for the purpose of clinical education entails certain risks, including the risk of exposure to infectious diseases or personal injuries. Similarly, there exists some level of risk in didactic settings. While every effort will be made to minimize risks to students, staff, and faculty, the elimination of all such risks is beyond the control of the program or college. Vaccination for many infectious diseases may be required by a healthcare facility for placement in clinical education.

Before engaging in clinical education, please read, initial, and sign that you have read, understand, and agree with the following:

- _____ 1. I will not participate in clinical education if I exhibit any signs/symptoms of infection, including but not limited to the following: runny nose, fever, cough, shortness of breath, head or body aches, sore throat, loss of smell, or nausea/vomiting/diarrhea.
- _____ 2. If I am exposed to COVID-19, I will immediately notify the appropriate person(s) at my clinical site by verbal notification and my designated clinical instructor by verbal and written notification. I understand I may be required to quarantine.
- _____ 3. If required by a facility's Respiratory Illness risk level, I will comply with masking and physical distancing requirements when possible, including lunches, breaks, or when occupying shared workspaces. I will wear facial coverings in accordance with CDC, nursing program, and health facility policy.
- _____ 4. I will comply with clinical site policies related to facial covering/glove wearing, handwashing, and disinfecting procedures before and after all patient encounters and at other time as specified.
- _____ 5. I will complete any required infection control or PPE training by my program or the clinical facility.
- _____ 6. I will follow all infection control guidelines, policies, and procedures of the clinical facility, program and/or college. Such guidelines are subject to change as more information becomes available.
- _____ 7. I recognize the dangers to myself and others of acquiring infectious diseases during clinical education, including the possibility of health-related consequences of such diseases. I recognize that vaccination for COVID-19 and other infectious diseases is required to decrease the risk of these consequences.

- _____ 8. I have the right to feel safe during clinical education; I have the ability to talk to my clinical instructor regarding any concerns I may have related to breaches in infection control measures or public health recommendations at any clinical education site.
- _____ 9. I recognize I have the right not to participate in clinical education because of the potential risk to myself and/or members of my household. I recognize that any missed clinical education time due to lack of participation or required quarantine time will need to be made up to complete the program requirements and may delay my graduation.
- _____ 10. If I test positive for COVID-19, I will notify my clinical instructor and lead instructor and provide proof of my test on request.
- _____ 11. I will follow all CEI or health facility-related screening requirements.

I voluntarily agree to assume all of the risks described above and accept sole responsibility for any injury or damages to myself (including, but not limited to, personal injury, illness, disability, and death). I hereby waive, release, discharge, and hold harmless CEI, including its employees, staff, trustees, directors/officials, agents, clinical partners, and volunteers from any and all liability associated with any injury or illness to me, including personal injury or illness or even death, loss of income or educational opportunity, property damage, and all losses, damages, expenses, liabilities, or claims of any nature arising out of, related to, or in any way connected to my use of the premises, facilities, and participation in any activities while in the nursing program.

Student Name: _____ Student ID #: _____
Student Signature: _____ Date: _____

Appendix G: Confidentiality Agreement for CEI Skills Lab and Clinical Experiences

As a participant in the College of Eastern Idaho skills lab and clinical education, I understand the significance of confidentiality with respect to information concerning simulated patients and fellow students. I will uphold the requirements of the Health Insurance Portability and Accountability Act (HIPAA) and any other federal or state laws regarding confidentiality throughout my time in the nursing program and will apply these standards to my patient care in lab and clinical situations. I agree to report any violations of confidentiality that I become aware of to my facilitator or instructor.

I agree to adhere to the following guidelines:

- All patient information is confidential and any inappropriate viewing (such as, on a computer that the student is not using their own CEI Student log-in to gain access), discussion, or disclosure of this information is a violation of CEI Nursing Program Policy.
 - This information is privileged and confidential regardless of format: electronic, written, overheard or observed. Scenarios are not to be discussed outside of the simulation group and will not be shared between groups unless approved by instructor/facilitator. I may view, use, disclose, or copy information only as it relates to the performance of my educational duties. Any inappropriate viewing, discussion, or disclosure of this information is a violation of hospital policy and may be a violation of HIPAA and other state and federal laws.
 - The lab is a learning environment. All scenarios, regardless of their outcome, should be treated in a professional manner. The student running the scenario should have everyone's respect and attention. Situations simulated in the lab are to be used as a learning tool and not to be used for humiliation of fellow students. "What happens in lab, stays in lab"
 - The simulators are to be used with respect and be treated as if they were live patients.
 - No Betadine, no ink pens (near the simulators or manikins), 22g IV or smaller for IV starts.
- _____ I agree to maintain strict confidentiality about the details of the scenarios, participants, and performance of any participant as outlined above.

_____ I authorize the CEI staff to video record my performance during clinical simulation experience (CSE).

_____ I authorize the CEI staff to use the video recording(s) for purposes including, but not limited to; debriefing, faculty review, educational, research, public relations, advertisement, promotional, and/or fund-raising activities.

_____ I understand this agreement is effective for the duration of my time in the nursing program.

Signature: _____

Printed Name: _____

Date: _____

Appendix H: Simulation Student Contract Consent

As a student in simulation, I agree to adhere to the following guidelines:

Code of Conduct

- I must act in a professional manner at all times while in simulation or the debriefing room for pre-briefing, monitoring, debriefing, or playback.
- I must come prepared for simulation including having all necessary materials (specifically outlined by primary instructor).
- I understand that I will be dismissed from the Simulation day if I arrive after the pre-assessment has started. As this is a clinical experience, tardiness is unacceptable and I will be required to do a make-up assignment per my instructor.
- I understand the student dress code will be enforced at all during in the simulation lab. See College of Eastern Idaho (CEI) policy and procedure for clinical/simulation dress code expectations. Violations in the dress code may prevent me from participating in simulation.
- I acknowledge and understand that photographs and/or video and audio recordings may be made during my training. I consent to being photographed and/or videotaped. I, further, understand that my photograph may be used in advertising or training literature or videos, and I consent to such use.
- I recognize the simulation manikins are to be used with respect and be treated as if they were live patients.
- I will not use betadine, markers, or pens on manikins. I will use only the provided mineral oil for lubricant.
- I will report any latex allergies or sensitivities to my instructor prior to the first simulation.
- I will keep my hands clean at all times.
- I will only use 22g IV catheters or smaller for IV starts in the simulation lab. (Verbalizing appropriate IV gauge for patient).
- I understand there is no food or drink allowed in the simulation lab (including the classroom and debrief rooms) except for prop purposes. Water is allowed in classroom and debrief rooms only.

Confidentially Agreement

- I understand all patient information (real or fictionalized) is confidential and any inappropriate viewing, discussion, or disclosure of this information is a violation of CEI policy and procedure.
- I recognize all patient information (real or fictionalized) is privileged and confidential regardless of format: electronic, written, overheard or observed.
- I understand faculty may use video/audio playback for debriefing purposes in group situations. Faculty may allow students to view simulations from the debriefing room. Students viewing the

simulation should remain professional at all times and not make derogatory comments regarding other students completing the simulation experience.

- I may view, use, disclose, or copy information only as it relates to the performance of my educational duties. Any inappropriate viewing, discussion, or disclosure of this information is a violation of CEI policy and may be a violation of Health Insurance Portability and Accountability Act (HIPAA) and other state and federal laws
- The simulation lab is a learning environment. All scenarios, regardless of their outcome, should be treated in a professional manner. The faculty/staff running the scenario should have everyone's respect and attention. Situations simulated in the lab are to be used as a learning tool and not to be used for humiliation of fellow students.
- I understand cell phones are not allowed in the simulation lab and/or debriefing rooms, unless specified by faculty.
- I understand that, in the rare event, others may be allowed to observe during the simulation and/or debriefing for training purposes but must fill out a simulation observer consent form, which covers code of conduct and confidentiality.

Fiction Contract

Throughout my participation in simulation, I will interact with several different manikins and/or patient actors depending on the specific scenario. I understand that instructors and staff will do all they can to make the simulation as real as possible. I acknowledge that simulation fosters active engagement in a safe learning environment.

I understand my role is to "enter into the spirit" of the simulation, engaging with the "patient," "family" and other members of the simulated healthcare team as if the situation were real. This will provide me with the best active learning opportunity possible.

Faculty and staff have the right to remove students from simulation at any time if conduct is violated.

I agree to adhere to the student simulation expectations as outlined.

Student signature: _____ **Date:** _____

Printed Name: _____

Appendix I: CEI Nursing Department Health Declaration/Physical Examination Form

This form must be completed by a licensed health care provider (MD, DO, NP, or PA).

Please read and complete ALL information.

Student Applicant Contact Information

Student Applicant Name: _____ Student Applicant ID #: _____
Street Address: _____ Home Phone: _____
City, State, Zip: _____ Work Phone: _____
Email: _____ Cell Phone: _____

Health Declaration

Nursing students are required to be able to meet and/or perform **the Technical Standards Essential for Nursing Practice**. These standards include a number of physical activities that students must perform in the skill lab and clinical portion of the program, with or without reasonable accommodation. These activities may include lifting clients, performing physical activities for several hours at a time without rest, obtaining readings from medical instruments, placing and obtaining objects from areas above the shoulders and below the waist, receiving verbal instructions, and communicating effectively with members of the healthcare team, clients, and families. The clinical experience also places the students under considerable mental and emotional stress as they undertake responsibilities and duties impacting clients' lives. Students must be able to demonstrate rational and appropriate behavior under stressful conditions.

Physical Examination

In conducting your physical examination to determine whether the above-named applicant can meet the **Technical Standards Essential for Nursing Practice** listed on the next page, please include an evaluation of the following systems:

- Basic vital statistics to include height, weight, blood pressure, pulse, respiration, and temperature
- Vision (Snellen Chart)
- Hearing (Gross-whisper heard at 3 feet)
- EENT
- Cardiovascular System
- Respiratory System
- GI System
- GU System
- Neuromuscular System
- Musculoskeletal System
- Endocrine System
- Integumentary System
- Neurological System

Please read the CEI Nursing Department **Technical Standards Essential for Nursing Practice** listed on the next page and then complete the two questions.

Technical Standards Essential for Nursing Practice

| Functional Ability | Standard | Example of Required Activity |
|---|---|---|
| Gross Motor Skills | Gross motor skills sufficient to provide the full range for safe and effective client care activities | <ul style="list-style-type: none"> • Move within confined spaces such as treatment room or operating suite • Assist with turning and lifting clients • Administer CPR |
| Fine Motor Skills | Fine motor skills sufficient to perform manual psychomotor skills | <ul style="list-style-type: none"> • Pick up and grasp small objects with fingers such as insulin syringe, pills • Perform tracheostomy suctioning, insert urinary catheter |
| Physical Endurance | Physical stamina sufficient to remain continuously on task for up to a 12 hour clinical shift while standing, sitting, moving, lifting, and bending to perform client care activities | <ul style="list-style-type: none"> • Walk/stand for extended periods, turn, position, and transfer clients. • Manually resuscitate clients in emergency situations |
| Physical Strength | Physical strength sufficient to perform full range of required client care activities | <ul style="list-style-type: none"> • Push and pull 250 pounds on wheelchair, bed, or gurney • Lift and move heavy objects up to 50 pounds |
| Mobility | Physical ability sufficient to move from room to room and maneuver in small spaces; full range of motion to twist/bend/stoop/squat, reach above shoulders and below waist, and move quickly, manual and finger dexterity; and hand-eye coordination to perform nursing activities | <ul style="list-style-type: none"> • Move around in work areas and treatment areas. Position oneself in the environment to render care without obstructing the position of other team members or equipment |
| Hearing | Auditory ability sufficient for physical monitoring and assessment of client health care needs | <ul style="list-style-type: none"> • Hear normal speaking level sounds • Hear auscultatory sounds • Hear auditory alarms (monitors, fire alarms, call bells) • Hear cries for help |
| Visual | Normal or corrected visual ability sufficient for accurate observation and performance of nursing care | <ul style="list-style-type: none"> • See objects up to 20 feet away • Visual acuity to read calibrations on 1 ml syringe • Assess skin color (cyanosis, pallor) |
| Tactile | Tactile ability sufficient for physical monitoring and assessment of health care needs | <ul style="list-style-type: none"> • Feel vibrations (pulses) • Detect temperature changes • Palpate veins for cannulation • |
| Smell | Olfactory ability sufficient to detect significant environmental and Client odors | <ul style="list-style-type: none"> • Detect odors from client (foul smelling drainage, alcohol breath) • Detect smoke |
| Emotional/Behavioral/ Mental Health | Emotional stability and appropriate behavior sufficient to assume responsibility/accountability for actions | <ul style="list-style-type: none"> • Establish rapport with clients, instructors and members of the healthcare team • Respect and care for persons whose appearance, conditions, beliefs, and values may be in conflict with their own. • Deliver nursing care regardless of the client's race, ethnicity, age, gender, religion, sexual orientation, or diagnosis |
| Professional Attitudes and interpersonal skills | Present professional appearance and demeanor; demonstrate ability to communicate with clients, supervisors, members of healthcare team to achieve a positive and safe work environment. Follow instructions and safety protocols | <ul style="list-style-type: none"> • Conduct themselves in a composed, respectful manner in all situations and with all persons • Work with teams and work groups • Establish and maintain therapeutic boundaries |

| | | |
|---------------|--|---|
| | Honesty and integrity beyond reproach | <ul style="list-style-type: none"> • Demonstrate emotional skills to remain calm and maintain professional decorum in an emergency/stressful situation • Demonstrate prompt safe completion of all client care responsibilities • Adapt rapidly to changing environments/stress • Exhibit ethical behaviors and exercise good judgment |
| Communication | Oral communication skills sufficient to communicate in English with accuracy, clarity, and efficiently with clients, their families, and the members of the health care team, including non-verbal communication, such as interpretation of facial expressions, affect, and body language. | <ul style="list-style-type: none"> • Give verbal directions and follows verbal directions from other members of the healthcare team and participate in healthcare team discussions for client care • Elicit and record information about health history, current health status and responses to treatment for clients or family members • Convey information to clients and others as necessary to teach, direct and counsel individuals in an accurate, effective, and timely manner • Recognize and report critical client information to their caregivers. |

Licensed Health Care Provider's Conclusions Questions #1 and #2 must be answered.

1. To the best of your knowledge, do the results of your physical examination indicate that the student applicant will be able to deliver safe and efficient client care while in the Nursing Program?

Yes **OR** No (circle one)

If no, please explain. If additional space is required, please attach your explanation on letterhead stationery. _____

2. To the best of your knowledge, can the applicant perform ALL of the Technical Standards Essential for Nursing Practice?

Yes **OR** No (circle one)

If no, please explain which standards the applicant is unable to perform and why. If additional space is required, please attach your explanation on letterhead stationery. _____

ATTENTION STUDENT APPLICANT: If the health care provider's response to question # 1 or # 2 is "No", the student must contact CEI Disability Resources Center (DSR) to determine if reasonable accommodations can be made. Enrollment into the Nursing Department will be pending evaluation by the CEI DSR office and the Nursing Department.

Licensed Health Care Provider (MD, DO, NP, or PA)

Signature of Licensed Health Care Provider: _____ Date: _____

Please PRINT clearly or type

Name of Licensed Healthcare Examiner: _____

Title: _____

Phone Number: _____

Address: _____

Appendix J: CEI Nursing Program Request for Re-Entry

To be fully completed by student. Submission of this form to the Nursing Administrative Assistant is considered a request for a re-entry interview.

I am requesting consideration for re-entry into the College of Eastern Idaho's (choose one):

- __ Full Time Registered Nursing program
- __ Alternative Schedule Registered Nursing Program
- __ LPN to Registered Nursing Bridge Program
- __ Practical Nursing program.

The semester I am requesting to re-enter is (semester and year): _____

Please provide the following **now**:

- Overall GPA: _____
- Attach CEI unofficial transcript.
- Attach a letter to the Nurse Administrator explaining why you feel your request for Re-entry should be approved. You may also provide any additional documentation you feel may be helpful as the Nurse Administrator considers your application.

You will need to provide the following **after the re-entry interview** and by the date specified by the Nurse Administrator during the re-entry interview:

- New **CEI Nursing Department Health Declaration/Physical Examination Form**.
- New **Background Check** per CEI nursing department specifications.
- New/updated **immunizations** per CEI nursing department specifications.

Student Statement:

I understand that I must have a re-entry interview with the Nurse Administrator. This is my request for this interview. During this re-entry interview we will discuss how to ensure future success in the program, including how I met conditions set by the Nurse Administrator in the exit interview (if completed). If I chose not to have an exit interview, the Nurse Administrator may set conditions during the re-entry interview that must be met prior to re-entry and may require a second re-entry interview.

I understand re-entry is contingent upon space availability and there is no guarantee a seat will be available upon my return. I understand that failure to update my contact information or to check my CEI email may cause me to lose my re-entry seat because I cannot be contacted.

Student Name: (Please Print) _____

Any other names used while at CEI: _____

Student ID #: _____

Current Address: _____

(Street Address/City/ State/Zip)

Phone number: _____ **CEI Email:** _____

Student Signature: _____ **Date:** _____

Appendix K: CEI Nursing Program Withdrawal Form

Student Name: _____

Student ID: _____

Email Address: _____

Phone Number: _____

Program and Option: _____

Semester: _____

Reason for Request/Departure:

- Academic
- Medical
- Personal
- Financial
- Military Service

Briefly Describe Below:

Instructor/Administrator Recommendations for Success during Absence:

- Skills Lab Referral
- ATI
- Counseling Department
- Center for New Directions
- Disability Services Consult

Student's Re-Entry Plan:

- Plans to re-enter (see Re-entry Procedure in Nursing Student Handbook)
Anticipated Date of Return: (Circle One) Spring Fall Year: _____
- No Plans to Return
- Not Eligible
- Unknown

Student Signature: _____

Date: _____

Academic/Nursing Faculty Advisor Signature: _____

Date: _____

Nurse Administrator Signature: _____

Date: _____

Nurse Administrator Comments:

Appendix L: Assessment Answer Challenge Form

Standard Overview

If a student wishes to challenge the accuracy of an answer, they must first submit two scholarly sources in writing to the instructor that support their answer. Once these sources are provided, the instructor will review the challenge to determine its validity. To protect the test, the instructor may need to help frame the question that must be answered to challenge a test question. The instructor's decision regarding the correct answer is final. All challenges to a question must be made within 2 weeks after the test closes, or prior to the final exam, whichever is earlier.

Source: Nursing Student Handbook (reviewed/approved 01/2026)

Instructions for Students

- Submit one form per challenged question.
- Complete Sections A–D. In Section C, include two scholarly sources (e.g., peer-reviewed journal articles, authoritative textbooks).
- Submit this form and copies/links to your sources within the policy timeframe (no later than 2 weeks after the test closes, or prior to the final exam—whichever is earlier). This form must be submitted by email to **both** the instructor and to Stephanie.allen@cei.edu
- The instructor will review the question with a secondary content expert. The instructor's decision is final.

Section A — Student & Assessment Details

Student Name:

Student ID:

Course / Section:

Instructor:

Assessment Title (Exam/Quiz/Lab):

Assessment Date:

Date Test Closed:

Date of Challenge Submission:

Section B — Information in Question

Reframed Question: (To protect the integrity of the exam, the full test question cannot be written on this form. Instead, use this space to describe the **substance** of the question you are challenging (for example, the topic, concept, or clinical principle it addressed) **without restating the full test item**. You may need the instructor's help in appropriately reframing the question to ensure accuracy while maintaining test security.)

Briefly describe the answer you believe is correct and your rationale (your reasoning):

Section C — Scholarly Sources Support (Two Required)

Source 1

Full citation (APA recommended):

DOI or stable URL:

Required copy attached (PDF/screenshot/book page):

- Yes
- No

Source 2

Full citation (APA recommended):

DOI or stable URL:

Copy attached (PDF/screenshot/book page):

- Yes
- No

Synthesis: Explain how each source supports your proposed answer (cite specific pages/sections):

I acknowledge my challenge is submitted within 2 weeks of test closure or before the final exam (whichever is earlier).

Section D — ATI Source Support

What does ATI say regarding this topic?

You must provide the specific ATI citation: _____

I acknowledge my challenge is submitted within 2 weeks of test closure or before the final exam (whichever is earlier).

Section E- Instructor Use Only

Decision:

Student's Answer Accepted Student's Answer Not Accepted

Instructor rationale/notes (optional):

Date Reviewed:

Instructor Signature:

Secondary Content Expert name/signature: _____

Gradebook update (if applicable):

- Completed
- Not Applicable

Date: _____

Reminder: The instructor's decision regarding the correct answer is final. All challenges must be submitted within the stated timeframe.