

Agenda Item # 14.K.

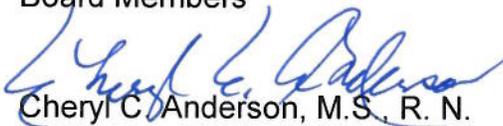


STATE AND CONSUMER SERVICES AGENCY • ARNOLD SCHWARZLINEISGER, GOVERNOR
BOARD OF VOCATIONAL NURSING & PSYCHIATRIC TECHNICIANS
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DATE: September 1, 2010

TO: Board Members

FROM: 
 Cheryl C. Anderson, M.S., R. N.
 Supervising Nursing Education Consultant

SUBJECT: Walter Jay M.D. Institute Vocational Nursing Program – Reconsideration of Provisional Accreditation
 (Director: Doreen Tan, Los Angeles, Los Angeles County, Private)

Walter Jay M.D. Institute Vocational Nursing Program is presented to the Board for reconsideration of its provisional accreditation. The program's status was changed to provisional accreditation on September 12, 2008, for the two – year period from September 12, 2008, through September 11, 2010. That action was taken due to the program's noncompliance with Vocational Nursing Rules and Regulations.

On May 22, 2009, the Board reconsidered the program's accreditation status and request to admit students. The Board approved the admission of students and directed issuance of a revised Notice of Noncompliance and Requirements for Correction.

The following table shows the variance of the program's pass rates from the state average annual pass rates of first time graduates of accredited vocational nursing programs for the past 11 quarters. This data substantiates the program's continued noncompliance with Section 2530(I) of the Vocational Nursing Rules and Regulations.

NCLEX-PN® Licensure Examination Pass Rates			
Quarter	State Average Annual Pass Rate	Program Average Annual Pass Rate	Variance from State Average Annual Pass Rate
Oct – Dec 2007	76%	65%	-11
Jan – Mar 2008	75%	50%	-25
Apr – Jun 2008	74%	48%	-26
Jul – Sep 2008	74%	44%	-30
Oct – Dec 2008	73%	11%	-62
Jan – Mar 2009	72%	35%	-37
Apr – Jun 2009	70%	26%	-44
Jul – Sep 2009	72%	23%	-49
Oct – Dec 2009	73%	21%	-52
Jan – Mar 2010	74%	17%	-57
Apr – Jun 2010	75%	10%	-65

The program requests approval to admit 30 full – time students on December 15, 2010, with a projected graduation of December 16, 2011.

On August 23, 2010, the Board received electronic notification that the name of the school had been changed to Hamilton State College.

History of Prior Board Actions

- On February 3, 2006, the Executive Officer approved the Walter Jay M.D. Institute to begin a vocational nursing program with an initial class of 40 students on March 1, 2006 only, and approved the program curriculum for 1588 hours, including 634 theory, and 954 clinical hours.
- On February 6, 2006, the director notified the Board that commencement of the initial class was delayed to May 2, 2006, with a projected graduation date of June 29, 2007.
- On April 12, 2007, the Executive Officer approved initial full accreditation for the Walter Jay M.D. Institute Vocational Nursing Program for the period April 12, 2007, through April 11, 2011, and issued a certificate accordingly. The Executive Officer also approved the program's request to admit a full-time class of 45 students to commence August 6, 2007 only, to **replace** students graduating June 29, 2007, thereby increasing class size; **and** approved the program's request to admit 45 students into an evening part-time program starting August 6, 2007 only, with a projected graduation date of September 25, 2008, thereby increasing the frequency of admissions.
- On March 11, 2008, Board staff contacted the Walter Jay M.D. Institute Vocational Nursing Program relative to its low pass rate on the NCLEX/PN[®]. The director was requested to evaluate the program's admission standards, teaching effectiveness, and other factors that may be affecting the students' performance.
- **On July 8, 2008, the program director resigned.**
- **On July 22, 2008, a new program director was approved.**
- On September 12, 2008, the Advisory Committee recommended placement of the Walter Jay M.D. Institute Vocational Nursing Program on provisional accreditation for a two-year period, September 12, 2008, through September 11, 2010, due to six (6) violations of the Vocational Nursing Rules and Regulations; and issuance of a notice identifying specific areas of noncompliance and requirements for correction as referenced in section 2526.1(e) of the Vocational Nursing Rules and Regulations. Additionally, the Advisory Committee deferred consideration of the program's request to admit a full-time class of 50 students, to a later date when sufficient resources are available and verifiable.
- On September 26, 2008, the Advisory Committee's recommendations were adopted by the designee of the Director of the Department of Consumer Affairs (DCA).
- On October 1, 2008, Bureau staff forwarded written notification relative to the change in the program's accreditation status, specific areas of noncompliance, and requirements for correction as referenced in Section 2526.1(e) of the Vocational Nursing Rules and Regulations (Notice of Change in Accreditation Status).

- On November 13, 2008, Bureau staff notified the program that the average annual pass rates for Walter Jay M.D. Institute Vocational Nursing Program had fallen more than the (10) percentage points below the state average annual pass rate for four (4) consecutive quarters. Bureau staff requested an analysis of the program and written plan for improving program pass rates.
- On January 15, 2009, Board staff requested the following information required to process the program's request to admit a replacement class:
 1. All program actions taken to correct the six (6) violations as specified in the report to the Advisory Committee, dated September 2, 2008.
 2. List of current faculty.
 3. Clinical rotation calendar or plan, including the following information.
 - a. Names and phone numbers for all currently approved clinical facilities;
 - b. Dates of Board approval per facility;
 - c. Type or classification of clinical experience;
 - d. Number of students authorized by the facility; and
 - e. Number of students assigned.
 4. Current and projected student enrollment including the August 2007 classes that graduated in November 2008.
 5. Clinical rotation calendar for Maternity and Pediatric clinical rotations.
 6. Comprehensive plan to address the program's low performance statistics on the NCLEX/PN based on a full analysis of all program elements including the curriculum, faculty, facilities, resources, and other variables that may impact student achievement.
- On January 20, 2009, the Board received program correspondence and supporting documents addressing actions taken to address previously identified violations. Additionally, the program submitted an analysis of existing program elements and a plan for improving the pass rates of program graduates on the NCLEX/PN®.
- On February 27, 2009, the Executive Officer deferred action on the program's request to admit a full-time class of 50 students to **replace** students who graduated in November 2008 for consideration by the Board on May 22, 2009. That action was taken due to the program's provisional accreditation status and the program's annual average pass rates on the NCLEX/PN®.
- On March 4, 2009, the program was notified of the Executive Officer's decision relative to its request. Additionally, the program was informed that Board consideration of the program's request was scheduled for May 22, 2009.
- On March 5, 2009, the program submitted email correspondence relative to actions taken in response to program need.
- On March 18, 2009, the Board notified the program that its average annual pass rates had fallen more than ten (10) percentage points below the state average pass rate for five (5) consecutive quarters.

- On April 8, 2009, the assigned consultant requested program information relative to current and projected enrollment, approved faculty, approved clinical facilities, and a clinical rotation calendar.
- On April 10, 2009, the Board received program correspondence per fax relative to current and projected enrollment, approved faculty, approved facilities, and clinical rotations.
- On April 16, 2009, Board staff received program correspondence per fax relative to prior correspondence and a "Checklist for Faculty Termination.
- On May 22, 2009, the Board reconsidered the program's accreditation status and its request to admit students. The Board approved the admission of students and directed issuance of a revised Notice of Noncompliance and Requirements for Correction
- **On June 8, 2009, a new program director was approved.**
- On June 18, 2009, the Board forwarded correspondence per certified and regular mail notifying the program of the change in its accreditation status and required corrections.
- On November 4, 2009, the Executive Officer approved the Walter Jay M.D. Institute Vocational Nursing Program's request, to admit a full-time **replacement** class for students graduating October 4, 2009, with 30 students to start on December 7, 2009, only, with an anticipated graduation date of March 12, 2011.
- On March 15, 2010, the Board received program correspondence dated March 1, 2010, relative to the director's comprehensive program analysis and plan of correction.
- On June 28, 2010, the Board was notified that the program had been sold. Additionally, the new owner reported his plans to hire a new program director.
- On July 13, 2010, the Board received correspondence from the program's new owner reporting a change in program administration effective September 2010.
- On July 26, the Board received correspondence from the owner relative to the program's plan of correction and plans to admit additional students in the future.
- On August 3, 2010, the Board received email correspondence from the owner stating that admission of the 30 students approved on November 4, 2009, will commence September 3, 2010.
- On August 13, 2010, the assigned consultant forwarded email correspondence strongly recommending that commencement of a new class be delayed until after September 16, 2010.
- On August 23, 2010, the Board received electronic notification from the owner that the name of the school formerly known as Walter Jay M.D. Institute had been changed to Hamilton State College.

Enrollment

The program is approved to offer both a full – time class and a part – time class, Board approval is required prior to the admission of each class. The pattern of admissions for current and proposed classes is seen in the enrollment table below.

The following table represents **projected** student enrollment based on the current and proposed class start. The table indicates a **maximum enrollment of 85 students** from **May 2006 through December 2010**.

ENROLLMENT DATA				
CLASS DATES		#Students Admitted	#Students Current or Completed	Total Enrolled
Start	Complete			
5/06		39	31	31
	7/07 (5/06 Class)		-31	31 – 31 = 0
8/07 (FT)		45	41	0 + 41 = 41
8/07 (PT)		45	44	41 + 44 = 85
	11/08 (8/07 FT)		- 41	85 - 41 = 44
	11/08 (8/07 PT)		- 44	44 – 44 = 0
6/09 (FT)		30	25	0 + 25 = 25
9/10 (FT) (Projected)		30		25 + 30 = 55
	9/10 (6/09 Class)		-25	55 – 25 = 30
12/10 (FT) (Proposed)		30		30 + 30 = 60

Licensing Examination Statistics

The following statistics, furnished by Pearson VUE, and published by the National Council of State Boards of Nursing as "Jurisdictional Summary of All First-Time Candidates Educated in Member Board Jurisdiction," for the period October 2007 through June 2010, specify the pass percentage rates for graduates of Walter Jay M.D. Institute Vocational Nursing Program, also known as Hamilton State College Vocational Nursing Program, on the National Council Licensure Examination for Practical/Vocational Nurses (NCLEX-PN®).

NCLEX-PN® Licensure Examination Data						
Quarterly Statistics				Annual Statistics*		
Quarter	# Candidates	# Passed	% Passed	State Quarterly Pass Rate	Program Annual Average Pass Rate	State Annual Average Pass Rate
Oct - Dec 2007	17	11	65%	76%	65%	76%
Jan - Mar 2008	5	0	0%	75%	50%	75%
Apr - Jun 2008	1	0	0%	70%	48%	74%
Jul - Sep 2008	2	0	0%	74%	44%	74%
Oct - Dec 2008	1	1	100%	73%	11%	73%
Jan - Mar 2009	27	10	37%	70%	35%	72%
Apr - Jun 2009	28	4	14%	71%	26%	70%
Jul - Sep 2009	9	0	0%	73%	23%	72%
Oct - Dec 2009	6	1	13%	76%	21%	73%
Jan - Mar 2010	3	1	33%	75%	17%	74%
Apr - Jun 2010	2	0	0%	75%	10%	75%

*The Annual Pass Rate changes every quarter. It is calculated by dividing the number of candidates who passed during the current and previous three quarters by the number of candidates who tested during the same period.

Based on the most recent data available (April – June 2010), the program's annual average pass rate is 10%. The California annual average pass rate for graduates from accredited vocational nursing programs who took the NCLEX-PN® for the first time during the same period is 75%. The annual average pass rate for the Walter Jay M.D. Institute Vocational Nursing Program, also known as the Hamilton State College Vocational Nursing Program, is **65** percentage points **below** the state annual average pass rate.

Faculty and Facilities

Section 2534(d) of the Vocational Nursing Rules and Regulations states:

"For supervision of clinical experience, there shall be a maximum of 15 students for each instructor."

The total number of Board-approved faculty is five (5). Of the total faculty, five (5) are approved to teach in the clinical area.

As noted previously, the program had a maximum enrollment of 85 students from May 2006 through August 2007. From August 2007 through December 2010, a maximum of 60 students is projected.

Based on a maximum enrollment of 60 students, four (4) instructors are needed. Therefore, the number of clinical faculty is adequate for the current and proposed enrollment.

Section 2534(b) of the Vocational Nursing Rules and Regulations states:

“Schools shall have clinical facilities adequate as to number, type, and variety of patients treated, to provide clinical experience for all students in the areas specified by Section 2533. There must be available for student assignment, an adequate daily census of patients to afford a variety of clinical experiences consistent with competency-based objectives and theory being taught.”

The program’s clinical facilities are adequate as to type and variety of patients treated to enable current and proposed students to meet clinical objectives in accordance with Section 2534(b) of the Vocational Nursing Rules and Regulations. This information has been verified by the consultant.

Other Considerations

Examination statistics furnished by the Pearson Vue and published by the National Council of State Boards of Nursing as “Jurisdictional Summary of All First-Time Candidates Educated in Member Board Jurisdiction,” substantiates that Walter Jay M.D. Institute Vocational Nursing Program, also known as Hamilton State College Vocational Nursing Program, has failed to achieve an annual average pass rate on the NCLEX-PN® that is within 10 percentage points of the state average annual pass rate for the eleven (11) consecutive quarters. As such, the program has been in violation of section 2530(l) of the Vocational Nursing Rules and Regulations for the periods October 2007 through June 2010.

As noted previously, the program was placed on provisional accreditation on September 12, 2008, for the two – year period from September 12, 2008, through September 11, 2010, due to noncompliance with Vocational Nursing Rules and Regulations. Specifically, the assigned consultant identified violations of sections 2534 (a); 2527 (b); 2534 (d); 2527 (a); and 2527 (c). On October 1, 2008, the Board forwarded correspondence per certified and regular mail notifying the program of the change in its accreditation status (see Attachment A).

Subsequently, the director requested approval to admit a full-time class of 30 students on May 25, 2009, with an anticipated graduation of July 1, 2010, to **replace** students who graduated in November 2008.

The Executive Officer deferred action on the program’s request for consideration by the Board at the May 22, 2009 meeting. That decision was based on prior identified violations that remained uncorrected and a new violation of Section 2530(l) of the California Code of Regulations, relative to program pass rates on the licensure examination.

On May 22, 2009, the Board reconsidered the program’s accreditation status and its request to admit students. The Board approved the admission of students and directed issuance of a revised Notice of Noncompliance and Requirements for Correction. On June 18, 2009, the Board forwarded the revised notice per certified and regular mail (see Attachment B).

On November 4, 2009, the Executive Officer approved the program's request, to admit 30 full – time students on December 7, 2009 only, to **replace** the class that graduated October 4, 2009. Graduation of the new class was scheduled for March 12, 2011.

On March 15, 2010, the Board received correspondence from the director relative an analysis of the program and its plan to improve program pass rates (see Attachment C). As specified therein, the following corrective actions were implemented prior to the class admitted in June 2009.

➤ **Revised Admission Criteria; Screening and Selection Criteria**

1. Prior to admission, the program requires all applicants to meet with the Program Director, Financial Aid Officer, and Campus Director.
2. A mandatory prep class has been designed to enhance students' achievement in the program. The class is four (4) weeks in length and includes the following content.
 - a. Medical Terminology;
 - b. Anatomy & Physiology;
 - c. Calculations of Dosages; and
 - d. Critical Thinking.

Students are required to obtain a minimum score of 75%.

➤ **Instructional Materials.**

1. Terminal objectives were revised to require students to pass an exit examination prior to graduation.
2. The instructional plan was revised to include the following.
 - a. Weekly examinations have been added.
 - b. Beginning with Module 2, students are required to complete ATI examinations consistent with program content.
3. Textbooks have been updated.

➤ **Evaluations**

1. Faculty

- a. Each instructor is evaluated by the program director after the completion of each module. Signed evaluations are placed in the instructors' file.
- b. Students are asked to evaluate theory presentations at the completion of each module.

2. Clinical Facilities

- a. Clinical facilities are evaluated by students and faculty at the end of each module.

- b. Each clinical facility in which students are assigned is visited weekly by the program director or clinical coordinator.

3. Student Evaluations

- a. A monthly didactic report is completed by the lead theory instructor to provide the director feedback relative to the progress of each student.
- b. Students are evaluated relative to clinical performance every two (2) weeks.
- c. At the end of each module, students are assigned a theory grade (%), a pass/fail clinical grade, and a pass/fail grade in professionalism.

On June 28, 2010, the Board was notified that the program had been sold and that a new program director would be hired. The assigned consultant discussed with the owner regulatory requirements for each vocational nursing program.

On July 13, 2010, the new owner notified the Board of the resignation of the current program director, effective September 2010. On July 26, 2010, the Board received correspondence from the owner relative to a plan to correct program deficiencies. Additionally, the owner advised of his plans to admit students.

On August 13, 2010, the director confirmed her intentions to return to clinical practice in September 2010. Additionally, the director advised of the owner's planned admission of a new class on September 3, 2010.

Subsequently, the assigned consultant forwarded electronic correspondence to the owner strongly recommending that commencement of a new class be delayed until after September 16, 2010. On August 23, 2010, the Board received electronic correspondence from the owner advising that the name of the school formerly known as Walter Jay M.D. Institute had been changed to Hamilton State College (see Attachment D).

In summary, the director has reported implementation of several interventions to address students' deficiencies in knowledge and clinical performance. As presented, those interventions were implemented prior to admission of the June 2009 class.

However, it must be noted that from October 2007 through June 2010, the program's average annual pass rates have declined substantially. Based on the April – June 2010, statistics, the program's **average quarterly** pass rate was **0%**; the **average annual** pass rate was **10%**. As such, the average annual pass rate for the Walter Jay M.D. Institute Vocational Nursing Program is **65** percentage points **below** the state average annual pass rate for the current quarter.

Recommendations:

1. Deny Walter Jay M.D. Institute Vocational Nursing Program's request to admit 30 students into a full – time class commencing December 15, 2010, with a projected graduation of December 16, 2011.
2. Revoke the provisional accreditation of the Walter Jay M.D., Institute Vocational Nursing Program, also known as the Hamilton State College Vocational Nursing Program, effective September 16, 2010.



October 1, 2008

Walter Jay M.D. Institute
Vocational Nursing Program
Doreen Tan, Director
501 Shatto Place, Suite 120
Los Angeles, CA 90020

Dear Ms. Tan:

Pursuant to the recommendation of the Bureau of Vocational Nursing and Psychiatric Technicians Advisory Committee on September 12, 2008, and its adoption by the Director of Consumer Affairs, the status of the Walter Jay M.D. Institute Vocational Nursing Program has been changed from full accreditation to provisional accreditation for the period of September 12, 2008 to September 11, 2010. Please sign and return the enclosed "Acknowledgement of Change in Accreditation Status" form by **October 15, 2008**.

NOTIFICATION

The following is a description of the violations, and requirements for correction.

Section 2534(a) of the Vocational Nursing Rules and Regulations states:

"Schools shall apply on a form provided by the Board for approval of each clinical facility prior to use."

Violation #1: On January 18, 2008, the former director submitted a clinical facility approval application that indicated that the program began using the facility on December 5, 2007. Thus, the program used a clinical facility prior to Board approval.

Requirements for Correction #1: On August 3, 2008, the new director acknowledged the violation by stating her understanding that clinical facilities must be approved by the Board prior to use. **The new director shall submit a plan to prevent recurrence.**

Section 2527(b) states:

"A school shall report to the Board within ten days of the termination of a faculty member."

Violation #2: The Walter Jay M.D. Institute, Vocational Nursing Program, terminated multiple faculty members without proof of Board notification.

Requirements for Correction #2: On August 3, 2008, the new director acknowledged the violation and stated that all faculty terminations will be reported to the Board within ten days. **The new director shall submit a plan to prevent recurrence.**

Section 2534(d) states,

“For supervision of clinical experience, there shall be a maximum of 15 students for each instructor.”

Violation #3: More than 15 students were assigned to one clinical instructor, in two clinical facilities, thus exceeding the regulatory clinical ratios.

Requirements for Correction #3: On August 3, 2008, the new director acknowledged the violation and stated that faculty will be assigned to students following regulatory ratios. **The new director shall submit a plan to prevent recurrence.**

Section 2527(a) states,

“The Board shall require such reports by schools and conduct such investigations as necessary to determine whether or not accreditation will be continued.”

Violation #4: The consultant contacted the former director on April 10, 2008, and issued a violation letter asking for a full accounting of faculty/student assignments for all currently enrolled students, for the length of their entire programs. The program response was due on April 18, 2008, due to the urgent need to determine whether or not the students were receiving adequate clinical instruction. The consultant requested telephone contact numbers for the faculty. The former director indicated that the faculty numbers would be forthcoming.

Requirements for Correction #4: The new director submitted an updated faculty/student clinical assignment document showing current clinical assignments. **The new director shall submit cell phone numbers of faculty members when they are assigned to clinical sites.**

Section 2527(c) states,

“A material misrepresentation of fact by a vocational nursing program in any information submitted to the Board is cause for denial or revocation of accreditation or provisional accreditation.”

Violation #5: There were material misrepresentations of fact on Faculty/Student Clinical Assignment forms submitted to the Board by the former director. The former director failed to provide the Board with information regarding use of teacher assistants.

The former director submitted forms to the Board that contradicted information previously submitted, and failed to account for the differences. The former director failed to respond to the Board request for specific teacher assistant and instructor assignments.

Requirements for Correction #5: The new director shall submit documents that truthfully represent program resources and faculty assignments.

Section 2532 states, in part,

“The course in vocational nursing shall consist of not less than 1530 hours or 50 semester units, and may be given on either a full-time or part-time basis.”

Violation #6: On July 29, 2008, the new director submitted a document showing that 58 students of the current student enrollment of 88 students are currently deficient in theory and clinical hours. Students are deficient in up to 214 hours of theory and clinical.

Requirements for Correction #6: The new director submitted plans for remediation for students who are deficient in theory and clinical instructional hours. **The director shall submit monthly progress reports for each affected student, and shall certify completion of remediation for each affected student.**

Section 2526.1 states, in part,

“A program’s failure to correct delineated areas of noncompliance is cause for revocation of provisional accreditation.”

RECONSIDERATION

Your program will be placed on the **May or September 2010** Board Meeting agenda for reconsideration of your accreditation status. The nursing education consultant assigned to your program will ask you to submit documentation of the correction of your violation(s) by the fifteenth day of the second month prior to that Board meeting.

REGULATION SECTION 2526.1

“(a) Provisional accreditation means a program has not met all requirements as set forth in this chapter and in CHAPTER 6.5 VN, Division 2 of the Business and Professions Code.”

The term "provisional accreditation" is meant to indicate to the program, students and potential students that the program IS NOT IN FULL COMPLIANCE with state laws and regulations and may lead to revocation of accreditation.

"(b) Provisional accreditation shall be granted for a period not to exceed two years unless the Board grants an extension."

The inclusive dates of provisional accreditation will be established by the Board and tracked by the assigned consultant. The consultant will schedule reports to the Board in a manner that will allow Board consideration of further action prior to the expiration period of the provisional accreditation.

"(c) The Board may place any program on provisional accreditation when a program does not meet all requirements as set forth in this chapter and in Section 2526 VN. A provisional accreditation may be extended when a program demonstrates to the satisfaction of the Board a good faith effort to correct all deficiencies."

The phrase "satisfactory to the Board" means there is objective data to demonstrate compliance with Article 5 regulations.

The phrase "good faith effort" means full cooperation with the formal 11-member Board and Board staff by sending requested information in a timely, organized and legible manner. Additionally, follow through must be evident in relation to identified objectives and statements of intent.

"(d) Any program holding provisional accreditation may not admit "new" classes beyond the established pattern of admission previously approved by the Board."

To establish a "pattern of admission" for programs that currently conduct ongoing admissions, the Board has determined that the frequency of admissions for the LAST SIX classes approved by the Board that immediately precede the date of the Board meeting at which accreditation status is to be considered.

For programs that are currently required to come before the Board for prior approval to admit each class, this is the "established pattern" and will continue until the pattern is changed by formal Board action. The number of students per class will be the MAXIMUM number approved by the Board for any of the six classes.

"(e) A program placed on provisional accreditation shall receive written notification from the Board. The notification to the program shall include specific areas of noncompliance and requirements for correction. A program's failure to correct delineated areas of noncompliance is cause for revocation of provisional accreditation."

Should you have questions, please do not hesitate to contact me.

Sincerely,

ANNE POWERS, Ph.D., R.N.
Nursing Education Consultant

Enclosure

cc: Advisory Committee Members



ATTACHMENT B

June 18, 2009

Doreen Tan, B.S., R.N., Director
Vocational Nursing Program
Walter Jay, M.D. Institute
501 Shatto Place, Suite 120
Los Angeles, CA 90020

Subject: Notice of Change in Accreditation Status

Dear Ms. Tan:

Pursuant to the action of the Board of Vocational Nursing and Psychiatric Technicians on May 22, 2009, the status of the Walter Jay, M.D. Institute Vocational Nursing Program has been changed relative to provisional accreditation. Please sign and return the enclosed "Acknowledgement of Change in Accreditation Status" form by **Friday, June 26, 2009**.

AREAS OF NON-COMPLIANCE [VIOLATION(S)]

This notice summarizes the current status of Board findings based on recent and prior communications identifying program violations. The violations identified relate to the program's non-compliance with requirements set forth in California Code of Regulations (CCR), Title 16, Article 5, Schools of Vocational Nursing.

Section 2534 (a) of the California Code of Rules and Regulations states:

"Schools shall apply on a form provided by the Board for approval of each clinical facility prior to use."

Violation #1: As specified in the consultant's report to the Advisory Committee dated September 2, 2008, the program assigned students to clinical rotations in facilities that had not been approved by the Board (see Attachment A).

Correction #1: This violation has been **corrected**. The program has proposed student clinical rotations at clinical facilities previously approved by the Board that are consistent with the Board-approved curriculum. Facility representatives have confirmed the sufficiency of clinical experience to facilitate students' achievement of approved objectives.

Section 2527(b) states:

"A school shall report to the Board within ten days of the termination of a faculty member."

Violation #2: As specified in the September 2, 2008, report, the program failed to notify the Board of the termination of multiple instructors (see Attachment A).

Plan of Correction #2:

This violation has **not been corrected**. On April 15, 2009, the consultant requested the director to develop and submit a process or procedure that would ensure Board notification within ten days of faculty terminations, thereby preventing reoccurrence of this violation. In response, the director submitted a document titled, "LVN Instructor Book Sign Out." The submitted document is completed by program instructors upon receipt of program materials. It does not address procedures to be completed by the program upon termination of faculty.

Section 2534 (d) states:

"For supervision of clinical experience, there shall be a maximum of 15 students for each instructor."

Violation #3: The September 2, 2008, report states that the program assigned sixteen (16) students in Term II to Temple Community Hospital. One (1) instructor and one (1) teacher assistant were assigned. Additionally, the program assigned sixteen (16) students in Term II to Integrated Nursing and Rehabilitation Center. One (1) instructor and one (1) teacher assistant were assigned (see Attachment A).

Correction #3: This violation has been **corrected**. The program has hired five (5) experienced instructors. Each Teacher Assistant is assigned to assist an approved and experienced instructor in the skills lab and clinical area only.

Section 2527 (a) states:

"The Board shall require such reports by schools and conduct such investigations as necessary to determine whether or not accreditation will be continued."

Violation #4: As stated in the September 2, 2008 report, the consultant requested the program to submit documentation of the faculty/student assignments for all currently enrolled students for each term of the program. Cell phone numbers for each instructor were also requested. The program failed to submit the requested documents (see Attachment A).

Additionally, the program failed to submit the required annual report due October 1, 2008.

Correction #4: This violation has been **corrected**. The program has submitted Faculty/Student Clinical Assignments for each term in the program. On May 6, 2009, the program submitted the 2006/2007 Annual Report that was due October 1, 2008.

Section 2527(c) states:

“A material misrepresentation of fact by a vocational nursing program in any information submitted to the Board is cause for denial or revocation of accreditation or provisional accreditation.”

Violation #5: As stated in the September 2, 2008, report, the assigned consultant identified material misrepresentations of fact in information and documents submitted to the Board on April 9, 2008. These misrepresentations addressed the assignment of instructors and teacher assistants and the use of teacher assistants to provide theory instruction in violation of section 2530 (d) (see Attachment A).

Correction #5: This violation has been **corrected** (see Correction #3).

Section 2530(l) states:

“The program shall maintain a yearly average minimum pass rate on the licensure examination that does not fall below 10 percentage points of the state average pass rate for first time candidates of accredited vocational nursing schools for the same period.

(1) Failure to maintain the required yearly average minimum pass rate for two years or eight consecutive quarters may be cause to place a program on provisional accreditation.”

Violation #6: The program's annual average pass rate has been more than ten (10) percentage points below the state average annual pass rate for six (6) consecutive quarters. Those pass rates are set forth in the following table.

Quarter	State Annual Average Pass Rate	Program Annual Average Pass Rate
Oct – Dec 2007	76%	65%
Jan - Mar 2008	75%	50%
Apr – Jun 2008	74%	48%
Jul - Sep 2008	74%	44%
Oct – Dec 2008	73%	11%
Jan – Mar 2009	72%	35%

Based on this data, the program failed to meet the annual average pass rate requirements.

REQUIRED CORRECTION(S)

1. In order to return to full accreditation status, the Walter Jay M.D. Institute Vocational Nursing Program must correct Violation #2 and Violation #4 within two (2) weeks of the date of this notice. Additionally, the program must bring its annual average pass rate on the National Council Licensure Examination for Practical/Vocational Nurses (NCLEX/PN[®]) to no more than ten (10) percentage points below the State annual average pass rate by **September 11, 2010**.
2. The program must prepare and implement a written plan to improve its pass rate and make modifications to the plan as necessary based on the success or failure of the actions taken. That plan must include a comprehensive analysis of the program, specific actions that will be taken to improve program pass rates, and timelines for expected results. The following elements must be addressed in the analysis.
 - a. Admission Criteria.
 - b. Screening and Selection Criteria.
 - c. Terminal Objectives.
 - d. Curriculum Objectives.
 - e. Instructional Plan.
 - f. Theory and Clinical Objectives for Each Course.
 - g. Lesson Plans for Each Course.
 - h. Textbooks.
 - i. Attendance Policy.
 - j. Remediation Policy.
 - k. Evaluations of Theory and Clinical Faculty.
 - l. Evaluations of Theory Presentations.
 - m. Evaluations of Clinical Rotations and Their Correlation to Theory Presentations.
 - n. Evaluation of Student Achievement.
3. The program must show documented progress by submitting a follow-up report in 10 months, but no later than **March 1, 2010**, evaluating the effectiveness of any corrective actions taken by each element listed in number 2 above.
4. The program must comply with all accreditation standards in Article 4 of the Vocational Nursing Practice Act, commencing at Business and Professions Code section 2880, and article 5 of the Board's regulations, commencing at California Code of Regulations, title 16, section 2525.

Failure to take these corrective actions may cause the Board to revoke the program's accreditation. In the event additional violations of the accreditation standards are identified, such violations may result in further corrective action or revocation of provisional accreditation.

FUTURE BOARD ACTION

Your program will be placed on the **May 2010** Board Meeting agenda for reconsideration of your accreditation status. The nursing education consultant assigned to your program will ask you to submit documentation of the correction of your violation(s) by the fifteenth day of the second month prior to that Board meeting.

OTHER IMPORTANT INFORMATION

Please be advised that, pursuant to the Board's regulations, the program will not be authorized to admit new classes beyond the established pattern of admissions previously approved by the Board. The established pattern of admissions approved by the Board is as follows: The program must request Board approval prior to the admission of each class.

In the event your program is required to submit any report(s) as a corrective action pursuant to this notice, such reports are required in addition to any other reports required pursuant to 2527 of the Board regulations.

The program may no longer advertise that it has full accreditation, and should take steps to correct any ongoing advertisements or publications in that regard.

A copy of title 16, California Code of Regulations, section 2526.1, regarding provisional accreditation is attached for your reference. A complete copy of the Board's laws and regulations can be found on the Board's web site at www.bvnpt.ca.gov.

Should you have questions, please do not hesitate to contact the Board.

Sincerely,

TERESA BELLO-JONES, J.D., M.S.N., R.N.
Executive Officer

Enclosure

cc: Board Members



Walter Jay M.D. Institute, an Educational Center

501 Shatto Place Suite #120, Los Angeles CA 90020 Office (213) 388-1369 Fax (213) 388-1338

Cheryl Anderson, RN, MSN
BVNPT Nursing Education Consultant
2535 Capitol Oaks Drive
Sacramento CA 95833

March 1, 2010

RE: Comprehensive Program Analysis and Plan of Correction

Dear Ms. Anderson:

A comprehensive analysis of the VN Program yielded the following information. Corrective actions are in bold type and indicated with an asterisk (*). The corrective actions were implemented prior to the start of our present class (June 2009). Positive effects of the changes are already evident as the students' performance on weekly ATI testing is very good and shows steady improvement.

- a. Admission Criteria and Screening & Selection Criteria
 - All applicants must take the Scholastic Level Exam (SLE). A minimum score of 21 is required.
 - The Health Education System, Inc. (HESI) exam is also administered. A minimum score of 75% is required.
 - All foreign education must be evaluated prior to admission.
 - All students must have proof of high school graduation or equivalent prior to admission.
 - Credit granting form will be submitted with application
 - **Applicants must meet with the VN Program Director, the Financial Aid Officer, and Campus Director prior to admission. ***
 - All applicants are screened for criminal records and drug abuse.
 - **All entering students must attend our mandatory prep classes for 4 weeks and pass with at least 75% before beginning nursing course work. The prep classes include Medical Terminology, Anatomy & Physiology, Calculations of Dosages and Critical Thinking. ***
- b. Terminal Objectives
 - **Terminal objectives are in place and appropriate. ***
 - **We are now requiring students to test weekly (starting with Module 2) using the ATI program to prepare for NCLEX. ***
 - **We are now requiring students to pass an NCLEX-style exit exam before graduating. ***
- c. Curriculum Objectives
 - **Curriculum objectives are in place and appropriate. ***
- d. Instructional Plan
 - **The instructional plan defines objectives and content for each theory/clinical day. ***
 - **Testing is conducted weekly, and covers the previous week's content. ***
 - **The lead theory instructor gives students and the program director feedback on individual progress via a monthly didactic report. ***
 - **Clinical instructors evaluate student progress q 2 weeks. ***

- e. Theory and Clinical Objectives for each course
- Theory and clinical objectives for each course are clearly defined.*
- f. Lesson Plans
- Daily Lesson plans for each course are in place.*
 - Lesson plans present an appropriate systemic and sequential educational methodology.*
- g. Textbooks
- The Anatomy and Physiology Learning System. Saunders, 3rd edition*
 - Medical Terminology Short Course. Saunders, 5th edition.*
 - Critical Thinking and Clinical Judgment. Saunders, 4th edition.*
 - Comprehensive NCLEX-PN Review Books. Saunders, 15th edition.
 - Rosdahl Textbook of Basic Nursing. Lippincott, 9th edition
 - Rosdahl Student Workbook (for Textbook of Basic Nursing).Lippincott, 9th edition.
 - Nurses Clinical Pocket Guide. FA Davis, 2nd edition.*
 - Taber's Drug Guide for Nurses. FA Davis, 8th edition.
 - Calculate with Confidence. Mosby, 5th edition.*
 - NANDA Nursing Guidebook. FA Davis, 10th edition.*
- h. Attendance Policy
- A comprehensive attendance policy is in place.*
 - Our attendance policy places upon students the same demands that an employer will place upon them as employees.*
 - Attendance is tracked daily and the policy is strictly enforced.*
- i. Remediation Policy
- A remediation policy has been developed which requires a student to attend remediation if his grade average falls below 75%. The student will also be placed on Academia Probation. The student must attend remediation and stay on probation until his grade averages 75% or greater. (However, the probationary period will not exceed a module period.) *
 - Remediation is conducted by the VN Program Director or a designated instructor. The program director will track the remediation process, including the follow-up dates. *
 - All students who are failing a module will be counseled by the program director three times prior to completion of the module. The form used for remediation counseling includes narrative space for the student to reflect on their situation and plan.*
 - All students who do not achieve a passing grade of 75% after remediation and counseling by the program director will be terminated from the vocational nursing program. *
 - Students who are terminated from the program will be advised of protocol to request an application from the BVNPT to test via equivalency. Also, terminated students will be advised of the school's appeal process.*
- j. Evaluations of Theory and Clinical Faculty
- The VN Program Director evaluates all instructors after each module's completion.*
 - The signed evaluations are placed in the instructors' files.*
- k. Evaluations of Theory Presentations
- The VN Program Director has students evaluate theory presentations at the completion of each module.*
 - The VN Program Director reviews the student evaluations of theory presentations and counsels/discusses with instructors, as indicated.*
 - The VN Program Director has theory instructors evaluate the instructional program at the conclusion of each module.*
 - The VN Program Director maintains a file of theory presentation evaluations*.
- l. Evaluations of Clinical Rotations and Their Correlation to Theory Presentations
- The VN Program Director has students and faculty evaluate clinical rotations/sites at the

completion of each module. *

- The VN Program Director reviews the evaluations and discusses with the Clinical Coordinator*.
- The VN Program Director and the Clinical Coordinator use the information to make decisions about clinical site placement.*
- The VN Program Director or the Clinical Coordinator visit utilized sites weekly and troubleshoot any identified problems, as well as discuss (with staff, faculty and students) the correlation of theory presentation with clinical patient care practices*.
- The VN Program Director maintains a file of clinical evaluations.*

m. Evaluation of Student Achievement.

- Students are tested weekly in theory.*
- Students receive a monthly evaluation from the theory instructor (Monthly Didactic Report).*
- Students receive bi-weekly evaluations from the clinical instructor.*
- Students receive a report from the theory instructor at the end of each module which includes a theory letter grade based on %, a clinical grade (pass/fail), and a professionalism grade (pass/fail).*
- During the first half of Module 1, students have their clinical skills evaluated in Skills Lab. The Skills Lab Instructor uses the 'Skills Lab Checklist' to evaluate each student.*
- All of the above evaluations are kept on file by the VN Program Director and/or the Student Services Coordinator.*

The previous VN Program Director, Ms. Doreen Tan, worked very hard to develop the program within the BVNPT guidelines. She replaced instructors that were not performing effectively, and instituted weekly NCLEX review classes for previous graduates who failed the NCLEX. I am certain that our present class, slated for graduation at the end of August, will perform well on NCLEX due to the changes made by Ms. Tan and my continuous monitoring of performance and outcomes.

Please let me know if you need any further information or clarification.

Thank you for your kind assistance.

Warm Regards,

Shirley Hiles, RN, DCH
VN Program Director
shirley@wjinstitute.com
310- 490-4733 (Cell)

ATTACHMENT D

Cheryl Anderson

From: Y. S. KIM [jpsuniv@gmail.com]
Sent: Monday, August 23, 2010 4:52 PM
To: Cheryl Anderson
Subject: NAME CHANGE OF THE SCHOOL
Attachments: BUSINESS LICENSE.pdf

TO: MS. CHERYL ANDERSON, M.S., R.N.
SUPERVISING NURSING EDUCATION CONSULTANT
BOARD OF VOCATIONAL NURSING AND PSYCHIATRIC TECHNICIANS

FROM: STEVE KIM, OWNER
HAMILTON STATE COLLEGE formerly named as WLATER JAY M. D. INSTITUTE

SUBJECT: REQUEST OF NAME CHANGE

DEAR MS. ANDERSON;

I AM REQUESTING THE NAME CHANGE OF THE SCHOOL FOR THE RECORD WITH BVNTP.

THE FORMER NAME OF THE SCHOOL WAS :

WALTER JAY M.D. INSTITUTE

THE NEW NAME OF THE SCHOOL UNDER THE NEW OWNERSHIP/MANAGEMENT/ADMINISTRATION IS:

HAMILTON STATE COLLEGE

*THE COPY OF THE BUSINESS LICENSE ATTACHED.

* HERewith I AM ALSO INCLUDING THE APPLICATION PACKET OF THE NEW INCOMING PROGRAM DIRECTOR
DR. EUNICE
WALKER FOR YOUR REVIEW AND CONSIDERATION.

ONCE AGAIN THANK YOU FOR YOUR GUIDANCE.

RESPECTFULLY SUBMITTED,

STEVE KIM, OWNER
HEAD OF SCHOOL & CAMPUS DIRECTOR
HAMILTON STATE COLLEGE

213-388-1369
213-505-3453(C)



CITY OF LOS ANGELES

OFFICE OF FINANCE
P.O. BOX 53200
LOS ANGELES CA 90053-0200

28 100-002840 1005 1

STEVE KIM
HAMILTON STATE COLLEGE
STEVE KIM
501 SHATTO PL STE 120
LOS ANGELES CA 90020-1747

501 SHATTO PLACE #120
LOS ANGELES, CA 90020-1747

THIS CERTIFICATE MUST BE POSTED AT PLACE OF BUSINESS

CITY OF LOS ANGELES TAX REGISTRATION CERTIFICATE

THIS CERTIFICATE IS GOOD UNTIL SUSPENDED OR CANCELLED

BUSINESS TAX

ISSUED: 5/31/2010

ACCOUNT NO.	FUND/CLASS	DESCRIPTION	STARTED	STATUS
0002503229-0001-1	L049	Professions/Occupations	05/01/2010	Active

ISSUED TO

STEVE KIM
HAMILTON STATE COLLEGE
STEVE KIM
501 SHATTO PLACE #120
LOS ANGELES, CA 90020-1747

501 SHATTO PLACE #120
LOS ANGELES, CA 90020-1747



ISSUED BY:

Antoinette D. Christensen

DIRECTOR OF FINANCE