

Agenda Item #11.D.



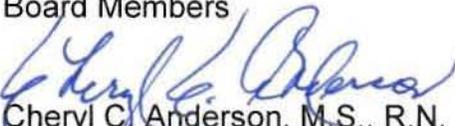
STATE AND CONSUMER SERVICES AGENCY • GOVERNOR EDWIN D. BROWN III

BOARD OF VOCATIONAL NURSING & PSYCHIATRIC TECHNICIANS
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DATE: August 25, 2011

TO: Board Members

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

SUBJECT: Institute of Medical Education, San Jose, Vocational Nursing Program – Consideration of Placement on Provisional Accreditation; Consideration of Request to Admit Students (Director: Theresa M. Mostasisa, San Jose, Santa Clara County, Private)

The Institute of Medical Education, San Jose, Vocational Nursing Program is presented to the Board for consideration of placement on provisional accreditation.

In accordance with Section 2526.1(c) of the Vocational Nursing Rules and Regulations,

“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...”

Section 2530(l) of the Vocational Nursing Rules and Regulations 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.”

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 fourteen (14) quarters. This data substantiates the program’s noncompliance with Section 2530(l) of the Vocational Nursing Rules and Regulations.

NCLEX-PN® Licensure Examination Pass Rates			
Quarter	State Annual Average Pass Rate	Program Annual Average Pass Rate	Variance from State Annual Average Pass Rate
Jan – Mar 2008	75%	48%	-27
Apr – Jun 2008	74%	44%	-30
Jul – Sep 2008	74%	58%	-16
Oct – Dec 2008	73%	58%	-15
Jan – Mar 2009	72%	65%	-7
Apr – Jun 2009	70%	61%	-9
Jul - Sep 2009	72%	61%	-11
Oct – Dec 2009	73%	61%	-12
Jan – Mar 2010	74%	56%	-18
Apr – Jun 2010	75%	55%	-20
Jul – Sep 2010	75%	53%	-22
Oct – Dec 2010	76%	49%	-27
Jan – Mar 2011	77%	53%	-24
Apr – Jun 2011	76%	58%	-18

On June 28, 2011, the Board received electronic correspondence requesting approval to admit 40 students commencing July 5, 2011, with a projected date of graduation of November 2, 2012. The proposed class would **replace** students completing course requirements on June 27, 2011.

On July 1, 2011, the program manager telephoned the Supervising Nursing Education Consultant (SNEC) to discuss the program's request. The manager was informed that the program must allow sufficient time to process the request. Additionally, the SNEC advised that the program was not likely to receive a response on or before the proposed July 5, 2011 class commencement. The manager was informed that the program should not anticipate a proposed date of commencement prior to July 18, 2011. By mutual agreement, the program's request was amended to request approval to admit the class commencing July 18, 2011.

On July 12, 2011, the Executive Officer deferred action on the program's request for consideration by the Board at the September 9, 2011 Board meeting. That action was based on the following factors:

- Program pass rate statistics; and
- Placement of the program on the agenda at which the Board was scheduled to consider placement of the program on provisional accreditation.

The consultant notified the director of the decision.

History of Prior Board Actions

- **On May 12, 2006, the Board approved the Institute of Medical Education's request to begin a vocational nursing program with an initial class of 60 students on May 22, 2006 only, with a completion date of April 6, 2007.**

Subsequently, the Board learned that the school had admitted 85 students without prior Board approval.

- **On June 18, 2006, a new program director was approved.**
- **On June 29, 2006, a Board representative made an unannounced visit to the program as a result of numerous student complaints. Ten (10) violations were identified.** On August 22, 2006, the school submitted a plan to correct the identified violations. The submitted plan of correction was approved.
- On September 8, 2006, the Board considered a report relative to the program's violations. A full survey was scheduled for October 2006. A report relative to the survey visit and status of corrections was scheduled for presentation at the February 2, 2007 Board meeting.
- On January 11, 2007, the Board approved full accreditation for the Institute of Medical Education, San Jose, Vocational Nursing Program for the period February 2, 2007, through February 1, 2011, and issued a certificate accordingly. Additionally, the Board approved the program's request to admit 60 students on February 5, 2007, with a projected completion date of April 11, 2008, to **replace** students graduating April 6, 2007, only. Additionally, the Board directed that the program submit a follow-up report by January 4, 2008 relative to program compliance with its grading and remediation policies and student pass rates
- On June 5, 2007, the Board approved the program's request to commence a 14-month evening class on June 25, 2007 only, graduating August 2008, with a class of 60 students.
- The program reported that commencement of the June 25, 2007 evening class was delayed to August 15, 2007.
- On September 20, 2007, the Board approved the program's request to commence a full-time day class of 60 students commencing October 29, 2007 and graduating November 21, 2008.
- On December 18, 2007, the Board received the program's follow-up report relative to compliance with its Remediation Policy and pass rates on the NCLEX/PN[®]. Information contained therein confirmed that commencement of the June 25, 2007 evening class was delayed to August 15, 2007.
- On March 19, 2008, the Board approved the program's request to admit a full-time evening class of 60 students commencing March 24, 2008 only, graduating May 13, 2009. Additionally, the Board required the program's submission of a follow-up report by June 1, 2008, relative to the effectiveness of its Remediation Policy and program pass rates on the licensure examination.

- **On March 24, 2008, correspondence was sent to the director stating the Board's concerns relative to the status of the program. A follow-up report and analysis were requested by June 1, 2008 relative to the effectiveness of the program's Remediation Policy and the program's ability to prepare students to pass the National Council Licensure Examination for Practical/Vocational Nurses (NCLEX/PN[®]) as evidenced by quarterly and annual pass percentage rates.**
- On May 28, 2008, the Executive Officer approved the program's request to admit a full-time day class of 60 students commencing June 16, 2008 only, graduating July 3, 2009, to **replace** students graduating April 12, 2008.
- On July 22, 2008, the Bureau received electronic correspondence from the Director confirming the submission of her resignation effective July 31, 2008.
- **On September 15, 2008, a new program director was approved.**
- On September 16, 2008, the assigned consultant forwarded correspondence to the director advising that the program's average annual pass rates on the NCLEX/PN[®] had fallen more than ten (10) percentage points below the state average annual pass rate for the past **four (4) quarters**. The director was requested to submit a written plan for improving the program's pass rates by October 16, 2008.
- On September 17, 2008, the Bureau received electronic correspondence advising that the Assistant Director had resigned.
- On October 6, 2008, the Bureau received the program's plan for improving its pass rates on the NCLEX/PN[®].
- On October 8, 2008, the Executive Officer approved the program's request to admit an evening class of 60 students commencing November 3, 2008 only, graduating December 18, 2009, to **replace** students graduating September 25, 2008.
- **On October 29, 2008, the assigned consultant met with the new program director relative to the program's plan for improving pass rates and other critical areas impacting student achievement.** The director reported that commencement of the November 3, 2008 evening class had been delayed to November 10, 2008.
- On October 30, 2008, the Executive Officer approved the program's request to admit a full - time evening class of 60 students commencing November 3, 2008 only, graduating December 18, 2009, to **replace** students graduating September 5, 2008. The program was required to submit a follow-up report relative to student achievement, grading and remediation policies, and student pass rates on the licensure examination February 1, 2009.
- **On January 5, 2009, the program was issued a Notice of Violation for its use of an instructor that had not been approved by the Board. The director was requested to submit a plan of correction that would prevent reoccurrence of the violation.**

- On January 15, 2009, the assigned consultant forwarded correspondence notifying the director that the program's pass rates on the NCLEX/PN[®] had fallen more than ten (10) percentage points below the state average pass rate for the past **five (5) quarters**. The director was requested to submit a report relative to actions taken to correct previously identified program deficits, the effectiveness of the previously submitted plan, including any and all modifications made as a result of an administrative analysis.
- On January 23, 2009, the Board received correspondence from the director relative to the program's plan of correction for the identified violation. Additionally, the program submitted a report relative to actions taken to address its low program pass rates on the NCLEX/PN[®].
- **On February 17, 2009, the assigned consultant met with the program and school directors relative to the program analysis, plans to improve pass rates on the NCLEX/PN[®], and plans to address program deficits and other critical areas impacting student achievement.**
- On February 27, 2009, the Executive Officer **denied** the program's request to admit a full – time day class of **sixty (60) students** and six (6) alternates commencing March 2, 2009; and **approved** the program's admission of **forty (40) students** commencing March 2, 2009.
- On March 3, 2009, the Executive Officer **reconsidered the February 27, 2009 decision**. The Executive Officer **approved** the Institute of Medical Education, San Jose, Vocational Nursing Program's request to admit a **full-time day class of sixty (60) students and six (6) alternates** commencing March 2, 2009 only, with a projected date of graduation of May 21, 2010, to **replace** students who completed course requirements on December 19, 2008. Additionally, the program was required to submit a follow-up report by March 31, 2009. The report should include, but not be limited to, a full analysis of the program, identification of factors contributing to the program's low pass rates on the NCLEX/PN[®], and specific actions the program will take to improve its pass rates. Correspondence was sent to the director advising of the decisions.
- On March 18, 2009, the Board received correspondence from the director and the required follow-up report.
- On March 18, 2009, the assigned consultant forwarded correspondence notifying the director that the program's pass rates on the NCLEX/PN[®] had fallen more than ten (10) percentage points below the state average pass rate for the past **six (6) quarters**. The director was requested to submit documentation verifying that elements of the program's plan of correction are being carried out and the effects of the employed interventions.
- On April 14, 2009, the Board received the program's revised plan of action to improve its pass rate on the NCLEX/PN[®].

- **On April 29, 2009, the assigned consultant met with the program and school directors relative to the program's plans addressing program deficits and other critical areas impacting student achievement.**
- On May 28, 2009, the Executive Officer approved the program's request to admit a full-time evening class of sixty (60) students and six (6) alternates commencing June 1, 2009 only, with a projected date of graduation of September 3, 2010, to **replace** students who completed course requirements on April 24, 2009.
- On September 3, 2009, the Executive Officer approved the program's request to admit a full-time day class of sixty (60) students and six (6) alternates commencing September 14, 2009 only, with a projected date of graduation of February 4, 2011, to **replace** students scheduled to complete course requirements on September 4, 2009.
- On March 1, 2010, the Executive Officer approved the program's request to admit a full-time evening class of sixty (60) students and six (6) alternates commencing March 1, 2010 only, with a projected date of graduation of June 6, 2011, to **replace** students who completed course requirements on February 12, 2010.
- On July 8, 2010, the Executive Officer **approved** the program's request to admit a **full-time evening class of sixty (60) students and six (6) alternates** commencing June 28, 2010 only, with a projected date of graduation of June 6, 2011, to **replace** students who completed course requirements on May 21, 2010; **and approved** the program's request to admit a **full-time evening class of sixty (60) students and six (6) alternates** commencing October 18, 2010 only, with a projected date of graduation of October 28, 2011, to **replace** students scheduled to complete course requirements September 3, 2010; **and** required the program to submit a status report relative to student progress to include identification of students requiring remediation, the establishment of remediation plans, and their effectiveness by August 31, 2010; **and** required the program to obtain Board approval prior to the admission of all classes.
- On July 8, 2010, the Board forwarded correspondence informing the director of decisions rendered by the Executive Officer.
- On July 30, 2010, the Board received correspondence from the director advising of a planned revision of the program curriculum to improve student achievement.
- On October 25, 2010, the Board received the completed Program Records Survey and supporting documents.
- On December 8, 2010, the assigned consultant forwarded correspondence notifying the director that the program's pass rates on the NCLEX/PN[®] had fallen more than ten (10) percentage points below the state average annual pass rates for the past **five (5) quarters**.
- On December 17, 2010, the Board received the program's request for approval of a major curriculum revision.

- On February 17, 2011, the assigned consultant forwarded correspondence notifying the director that the program pass rates on the NCLEX/PN[®] had fallen more than ten (10) percentage points below the state average annual pass rates for the past **six (6) quarters**. The director was requested to submit documentation verifying that elements of the program's plan of correction are being carried out and the effects of the employed interventions.
- On February 18, 2011, the Executive Officer approved continued full accreditation for the Institute of Medical Education, San Jose, Vocational Nursing Program for the four – year period from February 2, 2011 through February 1, 2015, and issued a certificate accordingly; **and** required the program to obtain Board approval prior to the admission of each class.

The Executive Officer **denied the program's request to admit a full-time day class of sixty (60) students and six (6) alternates** commencing February 17, 2011; **and approved the program's admission of a full – time day class of forty (40) students and four (4) alternates** on February 17, 2011 only, with a projected date of graduation of June 15, 2012, to **replace** students who completed course requirements on February 4, 2011; **and** approved the program's proposed curriculum for 1,578 hours, Theory Hours – 606; Clinical Hours – 972); **and required the program to demonstrate sustained improvement in its average annual pass rates on the NCLEX/PN.**

- On February 18, 2011, the Board forwarded correspondence informing the director of decisions rendered by the Executive Officer.
- **On May 11, 2011, the Board received electronic correspondence advising of the director's resignation effective May 20, 2011.**
- On May 17, 2011, the assigned consultant forwarded correspondence notifying the program that its pass rates on the NCLEX/PN[®] had fallen more than ten (10) percentage points below the state average annual pass rates for the past **seven (7) quarters**. Additionally, the director was notified of the program's placement on the agenda for the September 9, 2011 meeting, at which time the Board would consider placement of the program on provisional accreditation. The program was requested to submit information by July 15, 2011, relative to the program's enrollment; current faculty and clinical facilities; clinical rotation schedules for all enrolled students; and an analysis of the program's previously submitted plan of correction, identifying the effectiveness of each element and planned alterations.
- **On June 9, 2011, the Board approved a new program director.**
- **On June 23, 2011, the Board approved a new program director.**
- On June 28, 2011, the Board received electronic correspondence dated June 24, 2011, and attachments requesting Board approval to admit a class of 40 students on July 5, 2011, graduating November 2, 2012, to **replace** students graduating June 24, 2011.

- On July 1, 2011, the SNEC discussed the program's request with the program manager. Due to the date the request was received, the SNEC recommended revision of the proposed date of class commencement to July 18, 2011.
- On July 12, 2011, the Executive Officer deferred action on the program's request to admit 40 students commencing July 18, 2011 only, with a projected date of graduation of November 2, 2012, to **replace** students who completed course requirements on June 27, 2011, for consideration by the Board at the September 9, 2011 meeting; **and** continued the program's requirement to obtain Board approval prior to the admission of each class.
- On July 13, 2011, the Board forwarded correspondence informing the director of decisions rendered by the Executive Officer.
- On July 13, 2011, the Board received correspondence from Sunil Vethody, IME Vice President of Operations requesting reconsideration of the Executive Officer's decision.
- On July 14, 2011, the Board received correspondence from IME's Vice President of Operations requesting reconsideration of the Executive Officer's decision.
- On July 15, 2011, the Board received correspondence from IME's Vice President of Operations requesting reconsideration of the Executive Officer's decision.
- On July 15, 2011, the SNEC and NEC met with the program director and manager relative to the program's request for reconsideration of the EO's decision. The director submitted a four (4) page document dated July 13, 2011 and titled, "Action Plan for Provisional Accreditation.
- On July 18, 2011, the Board received faxed and electronic correspondence from Seth W. Wiener, IME legal counsel, and S. Vethody questioning the EO's decision and the impact on students.
- On July 19, 2011, the Board received electronic correspondence from S. Vethody. This correspondence included communication between Mr. Vethody and Mr. Wiener relative to the EO's decision deferring action on the program's request and pending Board action.

Additionally, the Board received faxed correspondence from Mr. Wiener dated July 19, 2011, requesting discussion of IME's accreditation status, and commencement of the proposed correspondence.

- On July 19, 2011, the Board forwarded correspondence to S. Wiener and S. Vethody in response to correspondence received July 13, 14, 15, and 18, 2011, relative to the program's June 28, 2011 Request to Admit a New Class and Provisional Accreditation.
- On July 20, 2011, the Board received electronic correspondence from the program director relative to the Executive Officer's decision to defer action on the program's request to admit students.

- On July 25, 2011, the Board received electronic correspondence, dated July 23, 2011, from S. Vethody acknowledging receipt of the Board's correspondence.
- On August 2, 2011, the Board received electronic correspondence, dated August 1, 2011, from the director relative to an update in the program's action plan and progress.
- On August 10, 2011, the Board received electronic correspondence, dated August 1, 2011, from the director relative to an update in the program's action plan and progress.
- On August 10, 2011, the Supervising Nursing Education Consultant sent correspondence to the director requesting the submission of documents for Board presentation.
- On August 18, 2011, the Board received the program's documents for dissemination to Board members.

Enrollment

Each class admission to the 13.5-month full-time day class and 14-month full-time evening class must have prior Board approval. The program's admission pattern for current classes is seen in the enrollment table below.

The following table represents **current and projected** student enrollment based on current and proposed class starts and completions, **as reported by the program on August 18, 2011**. The table indicates a **maximum enrollment of 183 students** for the period from **June 2008 through July 2011**.

ENROLLMENT DATA				
CLASS DATES		#Students Admitted	#Students Current or Completed	Total Enrolled
Start	Complete			
6/08 (AM)		49	35	35
11/08 (PM)		60	35	35 + 35 = 70
3/09 (AM)		49	41	70 + 41 = 111
6/09 (PM)		47	43	111 + 43 = 154
	9/09 (6/08 AM Class)		-35	154 - 35 = 119
9/09 (AM)		59	47	119 + 47 = 166
	2/10 (11/08 PM Class)		-35	166 - 35 = 131
2/10 (PM)		60	33	131 + 33 = 164
	5/10 (3/09 Day Class)		-41	164 - 41 = 123
6/10 (AM)		60	48	123 + 48 = 171
	9/10 (6/09 PM Class)		-43	171 - 43 = 128
8/10 (PM) Unapproved		60	55	128 + 55 = 183
	2/11 (9/09 AM Class)		-47	183 - 47 = 136
2/11 (PM)		44	39	136 + 39 = 175
	6/11 (2/10 PM Class)		-33	175 - 33 = 142
7/11 (PM) (Proposed)		40		142 + 40 = 182

Licensing Examination Statistics

The following 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,” for the period January 2008 through June 2011, specify the pass percentage rate for graduates of the Institute of Medical Education, San Jose, 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 Average Annual Pass Rate	State Average Annual Pass Rate
Jan – Mar 2008	3	1	33%	75%	48%	75%
Apr – Jun 2008	10	7	70%	70%	44%	74%
Jul – Sep 2008	29	18	62%	74%	58%	74%
Oct - Dec 2008	11	5	45%	73%	58%	73%
Jan – Mar 2009	43	30	70%	70%	65%	72%
Apr – Jun 2009	22	11	50%	71%	61%	70%
Jul – Sep 2009	39	24	62%	74%	61%	72%
Oct - Dec 2009	24	13	54%	76%	61%	73%
Jan – Mar 2010	16	9	56%	76%	56%	74%
Apr – Jun 2010	22	10	46%	74%	55%	75%
Jul – Sep 2010	14	8	57%	76%	53%	75%
Oct - Dec 2010	23	10	44%	77%	49%	76%
Jan – Mar 2011	20	14	70%	82%	53%	77%
Apr – Jun 2011	14	9	64%	71%	58%	76%

*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. If no data is available for the relevant period, the statistic is carried over from the last quarter for which data is available.

Based on the most current data available (April to June 2011), the program’s average annual pass rate is 58%. The California average annual pass rate for graduates from accredited vocational nursing programs who took the NCLEX-PN® for the first time is 76%. The average annual pass rate for the Institute of Medical Education, San Jose, Vocational Nursing Program is eighteen (18) percentage points **below** the state average annual 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 current number of Board-approved faculty totals 11 including the program director. The director is full-time and has 100% administrative duties. Of the total faculty, nine (9) are approved to teach clinical.

Based upon a **maximum enrollment of 183 students, 13 instructors are required for clinical supervision.** Therefore, the current number of faculty is **inadequate** 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 has clinical facilities that are adequate as to type and variety of clients 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

Previously cited information and licensure examination statistics illustrate the program's difficulty achieving and maintaining an average annual pass rate that is within ten (10) percentage points of the state average annual pass rate. For the period July – September 2007, the program's average annual pass rate was 72%. From October 2007 through June 2008, the program's average annual pass rate declined progressively to 44%.

On September 15, 2008, the Board approved a new program director. On October 29, 2008, the assigned consultant met with the director relative to the program's plan for improving the pass rates and several other areas of mutual concern. The director was requested to complete a thorough analysis of the program and submit a plan to address identified areas of deficiency. Several areas of deficiency were identified and plans of correction developed. On February 17, 2009, the consultant met with the director relative to the status of the program and actions taken to correct previously identified deficiencies.

Those areas of deficiency and corresponding actions follow.

➤ **Admission Criteria.**

The program was previously cited for inconsistent implementation of its approved Admission Criteria. On October 29, 2008, the assigned consultant recommended modification of the program's enrollment process including, but not limited to, changing the admissions screening examination from Wonderlic® to HESI.

On January 23, 2009, the director submitted documents substantiating completion of the recommended modifications. Effective June 2009, the director reported the program ceased utilization of Wonderlic® and begin requiring all applicants for admission to complete the HESI Admissions Assessment Examination.

➤ **Screening and Selection Criteria.**

On October 29, 2008, the assigned consultant requested modification of the program's screening and selection process. The consultant recommended the inclusion of measureable objective criteria for the selection of students.

The director reported completion of recommended revisions. Effective June 2009, all applicants for program admission are required to complete the HESI Admissions Assessment Examination.

➤ **Adequacy of Instructional Methods and Materials.**

A. Faculty.

On October 29, 2008, the consultant requested the development of a plan to address the program's overall quality of instruction. Additionally, a thorough evaluation of theory and clinical instructors was requested to identify those providing effective instruction and those requiring further training.

On February 17, 2009, the director reported the following:

1. An evaluation of all faculty members has been completed;
2. A schedule has been established to ensure quarterly follow-up evaluations; and
3. Ongoing education in instructional presentation and delivery is provided for all staff by the program.

B. Clinical Facilities.

On October 29, 2008, the consultant recommended the development of a process and schedule for evaluation of all clinical facilities to ensure the sufficiency and adequacy of clinical experience consistent with presented theory and competency-based clinical objectives.

On February 17, 2009, the director reported the completion of onsite evaluations of current clinical facilities. Further, the director reported that follow – up evaluations will be completed at the end of each quarter.

➤ **Curriculum Performance.**

On October 29, 2008, the consultant recommended the director complete a thorough review and analysis of the current curriculum to include, but not be limited to, distribution of hours, correlation of theory to clinical hours and content, terminal objectives, curriculum objectives, instructional plan, and lesson plans. Revisions in the

program's philosophy, conceptual framework, terminal objectives, and curriculum objectives were also recommended.

On February 17, 2009, the director reported completion of the recommended analysis, identification of deficiencies, and establishment of a timeline for completion. On June 1, 2009, the director reported the completion of minor revisions of the curriculum and implementation for the new class.

Additionally, the director reported that a major revision of the curriculum was in progress. Implementation was projected for October 2010.

➤ **Lesson Plans.**

On October 29, 2008, the consultant discussed with the director the regulatory requirement for lesson plans and their use as an instructional tool. The director was requested to review, develop, and modify program documents as required.

On February 17, 2009, the director reported the completion of daily lesson plans and faculty distribution for the current curriculum. Revised lesson plans for the revised curriculum have been completed.

➤ **Identification of Students with Performance Deficits.**

On October 29, 2008, the consultant recommended strategies for the evaluation of all current students. The purpose of the evaluation was the identification of students with deficits in theoretical knowledge and clinical performance. Based upon that evaluation, plans of remediation to correct identified deficits were to be developed and implemented for each student.

On January 23, 2009, the director submitted a progress report relative to the program's plan to improve student achievement and program pass rates (see Attachment A). As reported, all students had been evaluated and remediation plans had been established for those students with identified performance deficits. After implementation and reevaluation, five (5) students were terminated from the class scheduled to graduate in April 2009; six (6) students were terminated from the class scheduled to graduate November 2010; and one (1) student is currently being remediated. The director submitted a document setting forth the program's plan to improve student achievement and program pass rates

On June 24, 2010, the assigned consultant recommended the program explore other evaluation instruments to assist in identification of students with academic deficits and development of applicable remediation plans. Subsequently, the director advised that the program had implemented student assessment with HESI evaluation instruments.

For the period October – December 2008, the program's average **quarterly** pass rate declined to **45%**; the program's average **annual** pass rate was **58%**. For the same period, the state average **quarterly** pass rate was **73%**; the state average **annual** pass rate was **73%**.

On **February 27, 2009**, the Executive Officer **denied** the program's request to admit a day class of **sixty (60) students and six (6) alternates**; and approved the admission of **thirty (30 students and three (3) alternates**. The program director was notified of the decision. Subsequently, **reconsideration was requested**.

On **March 3, 2009**, the Executive Officer **approved** the program's admission of **sixty (60) students and six (6) alternates to replace** students completing course requirements on December 19, 2008. That decision was based on the tenure of the program director, the program's specific action plan to address low program pass rates, and the dates of graduates in the tested population. (See Attachment B)

From April 2009 through December 2010, the program's average annual pass rates declined progressively to a low of 49%. On December 8, 2010, the assigned consultant forwarded correspondence notifying the director that the program's pass rates on the NCLEX/PN[®] had fallen below 10 percentage points of the state average pass rate for the past five (5) quarters (see Attachment C).

On December 17, 2010, the director requested approval of a major curriculum revision. As proposed, the curriculum presented a full – time course of instruction divided into four (4) modules and offered over 57 weeks. On February 18, 2011, the revised curriculum was approved to include 1578 Hours (Theory – 606 Hours; Clinical 972 Hours).

On February 17, 2011, the assigned consultant forwarded correspondence notifying the director that the program's average annual pass rates on the NCLEX/PN[®] had fallen more than ten (10) percentage points below the state average annual pass rate for six (6) consecutive quarters. The director was requested to submit documentation verifying that elements of the program's plan of correction are being carried out and the effects of the employed interventions. (See Attachment D)

On February 18, 2011, the Executive Officer approved the program's continued accreditation. Additionally, the Executive Officer **denied** the program's request to admit a **full-time day class of sixty (60) students and six (6) alternates** commencing February 17, 2011; **and approved** the program's admission of a **full – time day class of forty (40) students and four (4) alternates** on February 17, 2011 only, with a projected date of graduation of June 15, 2012, to **replace** students who completed course requirements on February 4, 2011; **and approved** the program's proposed curriculum for 1,578 hours, Theory Hours – 606; Clinical Hours – 972); **and required the program to demonstrate sustained improvement in its average annual pass rates on the NCLEX/PN**. Correspondence was forwarded to the director advising decisions rendered by the Executive Officer. (See Attachment E)

On May 11, 2011, the Board received electronic correspondence advising of the director's resignation effective May 20, 2011.

On May 17, 2011, the assigned consultant forwarded correspondence notifying the program that its average annual pass rates had fallen more than ten (10) percentage points below the state average annual pass rate for seven (7) consecutive quarters. The director

was advised that the program was scheduled to appear before the Board for consideration of its accreditation status on September 9, 2011. The director was requested to submit the following information by July 15, 2011.

- Current enrollment information.
- Current faculty and facility information.
- Documentation demonstrating the clinical rotation schedules for all current classes.
- An analysis of the previously submitted correctional plan, indicating effective elements and those that were ineffective. Describe alterations to be made in the plan based on this analysis.
- Any other pertinent information to be considered by the Board. (Note: Information submitted after the deadline may not receive due consideration by the Board.)

(See Attachment F)

On June 9, 2011, the Board approved a new program director.

On June 23, 2011, the Board approved the current program director.

On June 28, 2011, the Board received electronic correspondence and supporting documents, dated June 24, 2011, requesting approval to admit a class of 40 students on July 5, 2011, graduating November 2, 2012, to **replace** students graduating June 24, 2011

On July 1, 2011, the SNEC received a telephone call from the program manager and other representative relative to the school's request. The director was not a part of the telephone call. The SNEC informed the manager of the following:

- The program must allow sufficient time to process the request;
- The program was not likely to receive a response on or before the proposed July 5, 2011 start date; and
- The program should not anticipate a proposed date of class commencement before July 18, 2011.

The SNEC and program manager agreed to amend the program's request for the class to begin on July 18, 2011. The representatives were advised that the Board would notify the director of the Executive Officer's decision relative to the program's request.

On July 12, 2011, the Executive Officer deferred action on the program's request for consideration by the full Board at the September 9, 2011 meeting. That action was based on the following factors:

- Program pass rate statistics; and
- Placement of the program on the September 9, 2011 agenda at which the Board was scheduled to consider placement of the program on provisional accreditation.

The consultant notified the director of the decision.

On July 13, 2011, the SNEC forwarded correspondence to the director advising of the Executive Officer's decision (see Attachment G).

On July 13, 2011, the Board received email correspondence from the program director relative to the Executive Officer's decisions rendered July 12, 2011 and the program's "Action Plan for Provisional Accreditation." (See Attachments H, I, and J) Additionally, the Board received email correspondence from Sunil Vethody, Vice – President of Operations, requesting reconsideration of the Executive Officer's decision of July 12, 2011 (see Attachment K).

On July 14, 2011, the Board received three (3) emails from Mr. Vethody, requesting reconsideration of the July 12, 2011 decision. (See Attachments L, M, and N) Additionally, email correspondence was received from the director. Attached thereto was a document entitled, "Action Plan for Provisional Accreditation. (See Attachment O)

It is noted that the identified solutions include a new analysis and several of the steps reported by the prior director. The director reports that significant changes have already occurred. It is further noted that such changes have not resulted in improved student achievement as evidenced by the lack of improvement in the program's average annual pass rates. Further, the submitted document does not specify planned modifications in the existing plan and the rationale for such revisions.

On July 15, 2011, the Board received electronic correspondence from Mr. Vethody requesting reconsideration of the prior decision (see Attachment P). Subsequently, the program director and manager appeared at Board headquarters requesting an unscheduled meeting to discuss the Executive Officer's decision. The SNEC and Nursing Education Consultant met with the representatives. The director presented a copy of the document submitted electronically on July 14, 2011. Board representatives discussed the program's status, decisions rendered relative to the program's request, and the rationale for those decisions.

On July 18, 2011, the Board received electronic correspondence from Seth Wiener, attorney, dated July 17, 2011. Specifically, Mr. Wiener questioned the decision of the Executive Officer to defer action on the program's request for consideration by the Board at the September 9, 2011 meeting, at which time the Board was scheduled to consider placement of the program on provisional accreditation. Mr. Wiener's letter included a letter from Mr. Vethody, also dated July 17, 2011. (See Attachment Q)

Additionally, on July 18, 2011, the Board received electronic and faxed correspondence from Mr. Vethody, dated July 17, 2011, relative to clarification of the program's status and

questioning the Board's authority to defer action on the program's request to admit additional students. (See Attachments R, S, T, and U)

On July 19, 2011, the Board received faxed correspondence from Mr. Wiener alleging the inability to reach Board staff. He requested discussion relative to the program's accreditation status and commencement of the proposed class. (See Attachment V) Additionally, the Board received electronic correspondence from Mr. Vethody that included electronic correspondence between Mr. Vethody and Mr. Wiener, IME attorney (see Attachment W).

On July 19, 2011, the Board forwarded correspondence to Mr. Wiener and Mr. Vethody per certified and regular mail. The correspondence responded to prior communications from Mr. Wiener and Mr. Vethody. (See Attachment X)

On July 20, 2011, the Board received correspondence from the director and program manager relative to actions taken by the program following the Executive Officer's July 12, 2011 decisions. As reported, all candidates for admission have been advised of the delayed class commencement. (See Attachment Y)

On July 25, 2011, the Board received electronic correspondence, dated July 23, 2011, from S. Vethody acknowledging receipt of the Board's correspondence. Mr. Vethody stated the program had taken many new measures to improve student success. Further, he advised that the director would forward periodic updates relative to the program's actions. (See Attachment Z)

On August 2, 2011, the Board received electronic correspondence, dated August 1, 2011, from the director reporting an update in the program's action plan and progress (see Attachment AA). Reported actions include, but are not limited to, the following.

- **Action Plan #2:** The director will continue to review, revisit, and search for previous history of IME Vocational Nursing Program.
- **Action Plan #3:** The director is being scheduled to visit and evaluate each clinical site to which students are assigned by September 1, 2011. The director reported the selection of three (3) new clinical sites.
- **Action Plan #6:** The director has begun an assessment of current program resources. Additionally, as reported, the director is "leading the faculty in assessing each student."
- **Action Plan #7:** The director is in the process of visiting each class and skills lab for evaluation of the instructor, theory and clinical instruction, and student participation or lack thereof. Further, the director reports that resignations have been accepted from a number of faculty; others were not rehired. The director reports that the program is in the process of hiring two (2) qualified faculty members and one (1) staff person.

- **Action Plan #8:** As reported, the program has directed increased consistency in the evaluation of students.
- **Action Plan #9:** The director reported that the program’s current remediation process is ineffective. Revision is in progress.
- **Action Plan #12:** The director reported completion of a review of the utilization and assignment of faculty. Based on that review, the director reported instructors have been reassigned consistent with the needs of the curriculum and expertise of the instructor.

On August 10, 2011, the Board received electronic correspondence, dated August 9, 2011, from the director reporting an update in the program’s action plan and progress (see Attachment BB).

On August 10, 2011, the SNEC sent correspondence to the director requesting the submission of documents for Board presentation

Based on submitted documents, materials, and the performance of program graduates on the NCLEX-PN® from January 2008 through June 2011, the following violations are identified.

Section 2527 (b) of the California Code of Regulations states:

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

Violation #1: Information submitted in support of the current request substantiates that the program failed to notify the Board of the termination of nine (9) faculty from November 2010 through May 15, 2011. It is noted that this is a reoccurrence of a violation for which the program was issued a Notice of Violation on January 5, 2009.

Correction #1: This violation is **not corrected**. On June 23, 2011, a new program director was approved. The director has been requested to complete an online self - directed New Director Orientation. That orientation addresses the responsibilities of the director relative to hiring and termination of faculty.

Section 2530(k) of the California Code of Regulations states:

“The program shall have prior Board approval to increase the number of students per class and/or increase the frequency of admission of classes. Criteria to evaluate a school’s request to increase the number of students per class and/or increase the frequency of class admissions include but are not limited to:

- (1) Sufficient program resources as specified in Section 2530 (a).**
- (2) Adequacy of clinical experience as specified in Section 2534.**

(3) Licensure examination pass rates as specified in Section 2530 (I)."

Violation #2: Information received from the program on July 13, 2011 and August 18, 2011, in support of the current request substantiates that the program admitted a class of 17 students on August 18, 2010. Board approval was **not** obtained prior to the admission of this class.

Correction #2: This violation is **not corrected**.

Section 2530(I) of the California Code of Regulations 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 #3: The program's average annual pass rate has been more than ten (10) percentage points below the state average annual pass rate for eight (8) consecutive quarters.

Submitted data substantiates that a total of 488 students have been admitted to the program from June 2008 through June 2011. Of the total admitted, 234 students, 48% of the admitted population, have graduated through June 30, 2011.

Published examination statistics confirm that 277 program graduates completed the NCLEX/PN from June 2008 through the most recent reporting period (April – June 2011). Of those tested, 161 graduates passed; 116 failed.

Plan of Correction #3: This violation is **not corrected**. The violation will be corrected when the program's pass rates improve consistent with regulatory requirements.

Recommendations:

1. Place Institute of Medical Education, San Jose, Vocational Nursing Program on provisional accreditation for the one - year period from September 9, 2011 through September 30, 2012, and issue a notice to the program to identify specific areas of non compliance and requirements for correction as referenced in Section 2526.1 (e) of the California Code of Regulations (see Attachment CC).
2. Deny the program's request to admit 40 students July 18, 2011.

Rationale:

Board records and program enrollment data, submitted July 13, 2011 and August 18, 2011, substantiate that the program's current number of Board – approved faculty totals 11, including the program director. Based on information reported on the program's Annual Report, the director works full time and has 100% administrative duties. **Of the total faculty, nine (9) are approved to provide clinical instruction.**

Based upon the current reported enrollment and the 40 proposed students, the program would have a maximum enrollment of 183 students if the requested class were approved for admission. To ensure compliance with existing regulatory requirements relative to clinical instruction, **ten (10) instructors are required for the current enrollment of 142 students. Thirteen (13) instructors would be required for the maximum projected enrollment of 183 students.** Given the foregoing, submitted information substantiates that the program's current number of approved faculty is **inadequate** for the **current and proposed enrollment.**

3. The program shall admit no additional students unless specifically approved by the full Board.
4. Require the program to show documented progress by submitting follow-up reports in three (3) months, but no later than December 1, 2011, and nine (9) months, but no later than June 1, 2012. The report must include a comprehensive analysis of the program, specific actions taken to improve program pass rates, timelines for implementation, and the effect of employed interventions. The following elements must be addressed in the analysis:
 - a. Current Enrollment.
 - b. Admission Criteria.
 - c. Screening and Selection Criteria.
 - d. Terminal Objectives.
 - e. Curriculum Objectives.
 - f. Instructional Plan.
 - g. Theory and Clinical Objectives for Each Course.
 - h. Lesson Plans for Each Course.
 - i. Textbooks.
 - j. Attendance Policy.
 - k. Remediation Policy.
 - l. Evaluations of Theory and Clinical Faculty.
 - m. Evaluations of Theory Presentations.
 - n. Evaluations of Clinical Rotations and Their Correlation to Theory Presentations.
 - o. Evaluation of Student Achievement.

The program shall notify all enrolled students of actions taken by the Board relative to the program's accreditation status, and expected time for resolution.

5. Require the program to 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 2526.
6. Require the program to demonstrate incremental progress in correcting the violations. If the program fails to satisfactorily demonstrate incremental progress, the full Board may revoke the program's accreditation.
7. Failure to take any of these corrective actions may cause the full Board to revoke the program's accreditation.
8. Place the program on the **September 2013** Board agenda for reconsideration of provisional accreditation.

Rationale: The Board has serious concerns relative to the program's non-compliance with regulations for pass rates on the NCLEX-PN®.

As noted previously, the program has had marked difficulty in achieving and maintaining acceptable average annual program pass rates. Board consultants have met with the director and program representatives on several occasions relative to the inadequate achievement of its student population. A number of strategies and critical interventions have been recommended. Reportedly, those interventions were implemented. However, the program's average annual pass rates remain noncompliant with regulatory requirements.

The current director was approved June 23, 2011. On July 13, 2011, the director submitted a document entitled, "Action Plan for Provisional Accreditation." It is noted that much of the document lists actions previously reported as completed by prior program administration. Information was not reported relative to the effectiveness of those interventions. Further, published program performance statistics evidence the impact of reported interventions on student achievement. Despite such evidence, submitted program documents fail to delineate modifications to be made in the plan of correction. This may be somewhat impacted by the director's recent date of employment.

Given the sustained severity of program noncompliance, the director must have sufficient time to complete a thorough analysis of all program elements, identify deficiencies, and implement strategies required for correction.

Attachment A: Program correspondence dated January 21, 2009; received January 23, 2009

Attachment B: Board correspondence dated March 3, 2009.

Attachment C: Board correspondence dated December 8, 2010.

Attachment D: Board correspondence dated February 17, 2011.

Attachment E: Board correspondence dated February 18, 2011.
Attachment F: Board correspondence dated May 17, 2011.
Attachment G: Board correspondence dated July 13, 2011.
Attachment H: Program correspondence received July 13, 2011.
Attachment I: Program correspondence received July 13, 2011.
Attachment J: Program correspondence received July 13, 2011.
Attachment K: Program correspondence received July 13, 2011.
Attachment L: Program correspondence received July 14, 2011.
Attachment M: Program correspondence received July 14, 2011.
Attachment N: Program correspondence received July 14, 2011.
Attachment O: Program correspondence received July 14, 2011.
Attachment P: Program correspondence received July 15, 2011.
Attachment Q: Program attorney correspondence dated July 17, 2011; received July 18, 2011.
Attachment R: Program correspondence dated July 17, 2011; received July 18, 2011.
Attachment S: Program correspondence dated July 17, 2011; received July 18, 2011.
Attachment T: Program correspondence dated July 17, 2011; received July 18, 2011.
Attachment U: Program correspondence dated; received July 18, 2011.
Attachment V: Program attorney correspondence dated; received July 19, 2011.
Attachment W: Program correspondence dated; received July 19, 2011.
Attachment X: Board correspondence dated July 19, 2011.
Attachment Y: Program correspondence dated; received July 20, 2011.
Attachment Z: Program correspondence dated July 23, 2011; received July 25, 2011.
Attachment AA: Program correspondence dated August 1, 2011; received August 2, 2011.
Attachment BB: Program correspondence dated August 10, 2011; received August 10, 2011.
Attachment CC: Program correspondence dated July 13, 2011; received August 18, 2011
Attachment DD: Draft Notice of Change in Accreditation Status.