

Agenda Item #12.A.2.



STATE AND CONSUMER SERVICES AGENCY • GOVERNOR EDWIN G. BROWN JR.
BOARD OF VOCATIONAL NURSING & PSYCHIATRIC TECHNICIANS
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DATE: April 25, 2012

TO: Board Members
Diane Oran

FROM: Diane Oran MN, RN, PMHNP-BC, CNS-BC
Supervising Nursing Education Consultant

SUBJECT: Community Based Education & Development College Vocational Nursing Program – Reconsideration of Provisional Approval; Consideration of Request to Admit Students (Director: Alice Sorrell – Thompson, Los Angeles, Los Angeles County, Private)

Community Based Education & Development College Vocational Nursing Program is presented to the Board for reconsideration of provisional approval¹. The program's status was initially changed to provisional approval on May 20, 2010, for the one-year period from May 20, 2010, through May 31, 2011. That action was taken due to the program's noncompliance with Section 2530 (l) of the California Code of Regulations which 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."

On May 20, 2011, the Board extended the program's provisional approval for the one-year period June 1, 2011, through May 31, 2012, and issued a notice to the program to identify specific areas of noncompliance and requirements for correction as referenced in Section 2526.1(e) of the California Code of Regulations. The program was required to bring its average annual average pass rate to no more than ten (10) percentage points below the State average annual pass rate for four (4) consecutive quarters by May 31, 2012.

Additionally, the Board took the following actions relative to program requests.

¹ Prior to January 1, 2012, references in article 4 of the Vocational Nursing Practice Act and article 4 of the Psychiatric Technicians Law provided that the Board accredits all vocational nursing and psychiatric technicians programs. Pursuant to Business and Professions Code Sections 2883 and 4532 (Senate Bill 539, Chapter 338, Statutes of 2011), **accredit** was changed to **approve**. There was no change to the Board's authority or jurisdiction.

1. **Approved** the program's request to admit **30** students into the non-degree class commencing **May 23, 2011**, graduating August 24, 2012, only, to **replace** students who graduated March 27, 2011.
2. **Approved** the program's request to admit **15** students into the degree-class on **June 6, 2011**, with a projected graduation of September 12, 2012.
3. **Denied approval** of the program's request to admit a class of **30** students into the non-degree class commencing **August 8, 2011**, with a projected graduation of November 14, 2012.
4. Continued the program's requirement to obtain approval by the Board prior to admission of each class.

On June 23, 2011, the Board received program correspondence requesting approval to admit replacement classes commencing September 19, 2011, November 28, 2011, and April 2012. On August 19, 2011, the Board received electronic correspondence from the director voluntarily withdrawing the request to admit students on September 19, 2011.

On November 10, 2011 the Board rendered the following decisions relative to program requests.

1. **Denied** the Community Based Education & Development College Vocational Nursing Program's request to admit 30 students into the non-degree class commencing November 28, 2011 only, graduating March 27, 2013, to **replace** students who graduated July 24, 2011.
2. **Approved** the program's admission of 15 students into the non-degree class commencing November 28, 2011 only, graduating March 27, 2013, to **replace** students who graduated July 24, 2011.
3. **Tabled** consideration of the program's request to admit 30 students into the non-degree class commencing April 3, 2012 only, graduating July 10, 2013, to **replace** students scheduled to graduate March 26, 2012.
4. Continued to require the program to obtain approval by the full Board prior to admission of each class.

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 17 quarters. This data substantiates the program's continued 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
Oct – Dec 2007	76%	63%	- 13
Jan – Mar 2008	75%	64%	- 11
Apr - Jun 2008	74%	51%	- 23
Jul - Sep 2008	74%	52%	- 22
Oct – Dec 2008	73%	46%	- 27
Jan – Mar 2009	72%	38%	-34
Apr – Jun 2009	70%	39%	-31
Jul - Sep 2009	72%	32%	-40
Oct – Dec 2009	73%	31%	-42
Jan – Mar 2010	74%	33%	-41
Apr – Jun 2010	75%	33%	-42
Jul – Sep 2010	75%	41%	-34
Oct – Dec 2010	76%	43%	-33
Jan – Mar 2011	77%	48%	-29
Apr-June 2011	76%	48%	-28
Jul-Sep 2011	75%	45%	-30
Oct-Dec 2011	75%	45%	-30
Jan-Mar 2012	74%	38%	-36

The program requests approval to admit 15 students into their non-degree class commencing May 21, 2012 and graduating September 7, 2013, to **replace** students who graduated March 26, 2012.

History of Prior Board Actions

- On September 10, 2004, the Executive Officer approved the Community Based Education and Development College's request to begin a vocational nursing program with an initial full – time class of 30 students on October 4, 2004, only; **and** approved the program curriculum for 1560 hours, including 582 theory and 978 clinical hours.
- **On February 8, 2005, a new program director was approved.**
- On March 24, 2005, the director notified the Board that commencement of the initial class had been delayed from October 4, 2004, to May 2, 2005, with a completion date of June 29, 2006.
- On February 7, 2006, the director notified the Board that the completion date for the initial class was changed to July 20, 2006.
- On May 12, 2006, the Executive Officer approved initial full accreditation for the Community Based Education and Development College Vocational Nursing Program for the period May 12, 2006, through May 11, 2010, and issued a certificate accordingly.

Additionally, the Executive Officer approved the program's request to admit 60 students starting July 31, 2006, to **replace** students graduating July 20, 2006, only thereby

increasing class size from 30 to 60 students per class. The projected completion date for the replacement class is September 28, 2007.

- On January 9, 2007, the Executive Officer approved the program's request to admit 60 students into a full – time class commencing January 15, 2007, with a projected completion date of March 21, 2008.
- On April 10, 2008, the Executive Officer approved the program's request to admit 10 students into a full-time class beginning on May 5, 2008, with a projected graduation date of August 18, 2009, thereby increasing frequency of admissions.
- On March 18, 2009, the program was notified that its average annual pass rate had fallen more than ten (10) percentage points below the state average annual pass rate for the past four (4) quarters. The program was requested to submit a written plan for improving their NCLEX-PN[®] pass rates by April 2, 2009.
- On May 14, 2009, the program was notified that its average annual pass rate had fallen more than ten (10) percentage points below the state average annual pass rate for the past five (5) quarters.
- On July 16, 2009, the program was notified that its average annual pass rate had fallen more than ten (10) percentage points below the state average annual pass rate for the past six (6) quarters. The program was requested to submit documentation that verified that elements of its plan of correction were being carried out and the effects of the employed interventions.
- **On August 10, 2009, a new program director was approved.**
- On September 8, 2009, the program was notified that its average annual pass rate had fallen below 10 percentage points of the state average annual pass rate for the past seven (7) quarters.
- On February 24, 2010, the program was notified that its average annual pass rate had fallen more than ten (10) percentage points below the state average annual pass rate for the past eight (8) quarters.
- On April 26, 2010, the assigned consultant contacted the director relative to the admission of five (5) classes without prior Board approval.
- On April 27, 2010, the Board received electronic correspondence from the director relative to the program's understanding that ongoing admissions had been approved.
- On May 14, 2010, the Board received electronic correspondence from the director alleging approval by a prior consultant. A copy of a Board report dated April 10, 2008 was attached. The Board's official report dated April 10, 2010 does not reflect the same information as submitted by the director.

- On May 20, 2010, the Board placed the program on provisional accreditation for the one-year period from May 20, 2010, through May 31, 2011, and issued a notice to the program to identify specific areas of noncompliance and requirements for correction as referenced in Section 2526.1 (e) of the California Code of Regulations; required the program to show documented progress by submitting a follow-up report in ten (10) months to include a comprehensive analysis of the program, specific actions taken to improve program pass rates, timelines for expected results, and the effectiveness of corrective actions taken to address the following elements:
 - a. Current Student 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.

Additionally, the program is required 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 2525.

The Board denied the program's request to admit 30 students commencing August 2, 2010, to replace students completing program requirements July 25, 2010. The program was required to admit no further classes without prior Board approval.

- On June 11, 2010, the program submitted electronic correspondence requesting approval to admit students to **replace** the class graduating July 25, 2010.
- On June 22, 2010, the Board forwarded correspondence notifying the program of specific areas of noncompliance and requirements for correction as referenced in Section 2526.1 (e) of the Vocational Nursing Rules and Regulations.
- On July 12, 2010, the Board received correspondence from the program with a copy of program correspondence dated June 10, 2010, current and projected enrollment data, information relative to faculty: student assignments, clinical rotations, and a FedEx shipment travel history.

- On July 28, 2010, the Board received notification per telephone that the program had mailed documents to the residence of President Vertido, stating the school had been unable to find another mailing address for the Board.
- On July 30, 2010, the Board received program correspondence dated July 26, 2010, sent to the residence of President Vertido, relative to a request to admit students July 26, 2010.
- On August 3, 2010, the director notified the Board that the number of students requested had been reduced to 30.
- On August 6, 2010, the Executive Officer deferred action on the program's request to admit students to the Board for consideration at the September 16, 2010 meeting. This decision was based on the program's pass rate statistics and previous Board action to deny students with a 33% pass rate. The consultant notified the director of the decision per telephone.
- On August 6, 2010, the Executive Officer was notified that the program administration had contacted President Vertido at his residence regarding the program's placement on the September 2010 agenda.
- On August 13, 2010, the Board forwarded correspondence to the director relative to contact with Board members.
- On August 19, 2010, the Board's legal counsel and the Supervising Nursing Education Consultant (SNEC) conducted a conference call with the program director, school DOE, and the school's legal counsel. The purpose of the call was to clarify the program's request for documents and achieve resolution.
- On September 16, 2010, the Board denied the Community Based Education & Development College Vocational Nursing Program's request to admit 30 students commencing August 9, 2010, to **replace** students completing program requirements July 25, 2010. The Board approved the program's admission of 15 students on November 2, 2010, with a projected graduation of March 26, 2012.
- On September 28, 2010, the Board forwarded correspondence to the director relative to decisions rendered at the September 16, 2010 Board meeting.
- On January 18, 2011, the Board received the program's electronic correspondence and supporting documents requesting approval to admit a new class on March 7, 2011.
- On February 14, 2011, the SNEC spoke with the director relative to clarification as to the absence of the program's request on the agenda for the February 25, 2011, Board meeting. The director was informed that the Board had scheduled reconsideration of the program's provisional accreditation status at the May 20, 2011 meeting.
- On February 28, 2011, the Board received the program's follow – up report.

- On April 4, 2011, the SNEC discussed with the director the program's request for approval to admit a new class. The director was informed that the request was scheduled for consideration by the Board at the May 20, 2011 meeting.
- On April 6, 2011, the Board received electronic correspondence from the director relative to the status of the program and the admission of future classes.
- On April 8, 2011, the Board received electronic correspondence from the director relative to the program's correction of identified violations.
- On April 18, 2011, the SNEC sent correspondence to the director requesting the submission of documents for Board presentation.
- On May 20, 2011, the Board extended the program's provisional accreditation for the one-year period June 1, 2011, through May 31, 2012, and issued a notice to the program to identify specific areas of noncompliance and requirements for correction as referenced in Section 2526.1(e) of the California Code of Regulations. The program was required to bring its average annual pass rate to no more than ten (10) percentage points below the State average annual pass rate for four (4) consecutive quarters by **May 31, 2012**. The Board **approved** the program's request to admit **30** students into the non-degree class commencing **May 23, 2011**, graduating August 24, 2012, only, to **replace** students who graduated March 27, 2011; **and approved** the program's request to admit **15** students into the degree-class on **June 6, 2011**, with a projected graduation of September 12, 2012; **and denied approval** of the program's request to admit a class of **30** students into the non-degree class commencing **August 8, 2011**, with a projected graduation of November 14, 2012; and continued to require the program to obtain approval by the Board prior to admission of each class.

The program was required to continue demonstration of progress in improvement of its pass rates on the NCLEX/PN[®], and was required to submit a follow-up report in 9 months, but no later than **February 1, 2012**. The report must include a comprehensive analysis of the program, specific actions taken to improve program pass rates, timeline for implementation, and the effect of employed interventions. The following elements must be addressed in the analysis:

- a. Current Student 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.

Additionally, the program was required 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.

The Board placed the program on the May 2012 Board Meeting agenda for reconsideration of provisional accreditation.

- On June 23, 2011, the Board received program correspondence requesting approval to admit replacement classes commencing September 19, 2011, November 28, 2011, and April 2012.
- On June 29, 2011, the Board forwarded to the director the Notice of Change in Accreditation Status.
- On July 25, 2011, the Board received additional information in support of the program's request to admit additional students.
- On August 10, 2011, the SNEC forwarded correspondence to the director requesting the submission of documents for Board presentation.
- On August 19, 2011, the Board received electronic correspondence from the director voluntarily withdrawing the request to admit students on September 19, 2011 and requesting approval to admit students November 28, 2011.
- On September 16, 2011, the Board received electronic correspondence and supporting documents from the director requesting approval to admit students in November 2011 and April 2012.
- On October 7, 2011, the SNEC forwarded correspondence to the director requesting the submission of documents for Board presentation.
- On November 10, 2011 the Board **denied** the program's request to admit 30 students into the non-degree class commencing November 28, 2011 only, graduating March 27, 2013, to **replace** students who graduated July 24, 2011; **and; approved** the program's admission of 15 students into the non-degree class commencing November 28, 2011 only, graduating March 27, 2013, to **replace** students who graduated July 24, 2011; **and,** denied the program's request to admit 30 students into the non-degree class commencing April 3, 2012 only, graduating July 10, 2013, to **replace** students scheduled to graduate March 26, 2012; **and, tabled** consideration of the program's admission of 15 students into the non-degree class commencing April 3, 2012 only, graduating July 10, 2013, to **replace** students scheduled to graduate March 26, 2012, to the May 2012 Board meeting; **and,** continued to require the program to obtain approval by the full Board prior to admission of each class.

- On November 23, 2011, the Board forwarded correspondence to the director relative to decisions rendered at the November 10, 2011 Board meeting.

Enrollment

The program requires prior Board approval for the admission of each class. The program offers a 63 – week full – time course of instruction, successful completion resulting in issuance of a diploma. Additionally, the program offers a 74 – week full – time course of instruction, successful completion resulting in an Associate of Arts degree. 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 **current and proposed** class starts and completions. The table indicates a **maximum enrollment of 137 students** from **April 2009 through May 2012**.

ENROLLMENT DATA				
CLASS DATES		#Students Admitted	#Students Current or Completed	Total Enrolled
Start	Complete			
4/09 (Unapproved - D)		40	30	30
8/09 (Unapproved - D)		33	30	30 + 30 = 60
10/09 (Unapproved – AA)		9	7	60 + 7 = 67
11/09 (Unapproved - D)		40	35	67 + 35 = 102
4/10 (Unapproved - D)		35	35	102 + 35 = 137
	7/10 (4/09 Class)		-30	137 - 30 = 107
	11/10 (8/09 Class)		-30	107 – 30 = 77
11/10		15	15	77 + 15 = 92
	3/11 (10/09 Class)		-7	92 – 7 = 85
	3/11 (11/09 Class)		-39	85 – 39 = 46
5/11		15	15	46 + 15 = 61
6/11		30	23	61 + 23 = 84
	7/11 (4/10 Class)		-35	84 - 35 = 49
11/11		15	15	49 + 15 = 64

	3/12 (11/10 Class)		-15	64 - 15 = 49
5/21/12 (proposed)		15		49 + 15 = 64

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 March 2012, specify the pass percentage rates for graduates of the Community Based Education & Development 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 Average Quarterly Pass Rate	Program Average Annual Pass Rate	State Average Annual Pass Rate
Oct - Dec 2007	1	1	100%	76%	63%	76%
Jan - Mar 2008	23	14	61%	75%	64%	75%
Apr - June 2008	11	3	27%	70%	51%	74%
July - Sep 2008	27	14	52%	74%	52%	74%
Oct - Dec 2008	21	7	33%	73%	46%	73%
Jan - Mar 2009	23	7	30%	70%	38%	72%
Apr - Jun 2009	21	8	38%	71%	39%	70%
July - Sep 2009	23	6	26%	74%	32%	72%
Oct - Dec 2009	20	6	30%	76%	31%	73%
Jan - Mar 2010	26	10	38%	76%	33%	74%
Apr - Jun 2010	27	10	37%	74%	33%	75%
Jul - Sep 2010	32	17	53%	76%	41%	75%
Oct - Dec 2010	22	9	41%	77%	43%	76%
Jan - Mar 2011	31	18	58%	80%	48%	77%
Apr - Jun 2011	9	1	11%	71%	48%	76%
Jul - Sep 2011	20	9	45%	74%	45%	75%
Oct - Dec 2011	12	8	40%	74%	45%	75%
Jan - Mar 2012	6	3	50%	77%	38%	74%

*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 recent data available (January – March 2012), the program's average annual pass rate is 38%. The California average annual pass rate for graduates from accredited vocational nursing programs who took the NCLEX-PN® for the first time during the same period is 74%. The pass rate for the Community Based Education & Development College Vocational Nursing Program is **36** 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 program's Board – approved faculty totals seventeen (17), including the program director. Of the total faculty, seventeen (17) are approved to teach in the clinical area.

Based on a maximum enrollment of 137 students, ten (10) instructors are needed. Therefore, the number of 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 was 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 the Community Based Education and Development College Vocational Nursing Program has failed to achieve an annual average pass rate on the NCLEX-PN® that is within ten (10) percentage points of the state average annual pass rate.

On December 12, 2008, the program submitted a plan for improving program pass rates. As specified therein, the following interventions were implemented.

- **Curriculum.** The number of theory hours was increased from 582 to 600 hours. The sequence of content was revised to better ensure students' progressive mastery of content. Critical thinking was integrated throughout the curriculum.
- **Instructional Methods and Materials.** Presentations on critical thinking were added to faculty meetings. Instructors were required to implement role-play, case studies, and other methodologies into theory presentations to enhance student comprehension.

On August 10, 2009, the current program director was approved.

On February 24, 2010, the consultant notified the program that its average annual pass rate had fallen more than ten (10) percentage points below the state average annual pass rate for the past eight (8) quarters. The program was requested to complete an analysis of all program elements and submit a written plan for improving their NCLEX-PN® pass rates. That plan was received April 14, 2010 with a revision submitted April 28, 2010.

As presented therein, the program's report addressed the following areas.

- **Revised Admission Criteria.**

The program has revised its Admission Criteria. Effective with the next class, applicants for program admission were required to meet the following criteria.

1. No less than 18 years of age.
2. High school graduation or equivalent thereof.
3. Complete the Assessment Technologies Institute (ATI) – CPAt with a minimum score of 40%.

- **Revised Curriculum.**

The director reported an analysis of the modular curriculum. Based thereon, the sequence of theory content in Module 1 was revised to include a foundation of Anatomy and Physiology.

- **Revised Grading Policy.**

Students are required to achieve a minimum score of 80% on all examinations. Additionally, a minimum grade point average of 80% is required.

- **Improved Identification of Students with Performance Deficits.**

The program requires all students to complete a comprehensive final examination per module with a minimum score of 80%. Additionally, students are required to complete the following ATI Level Examinations.

1. Fundamentals of Nursing Practice.
2. Mental Health Nursing Practice.

3. Pharmacology of Nursing Practice.
4. Nutrition for Nursing.
5. Adult Medical – Surgical Nursing.
6. Maternal – Newborn Nursing.
7. Nursing Care of Children.
8. Leadership and Management for Nursing Practice.

While the program does not require a minimum score on the ATI Level Examinations for class progression, the information is used to assess students' grasp of critical nursing concepts.

➤ **Improved Monitoring of Student Academic Progress.**

The director reports the development of an academic improvement program whereby students are provided early intervention for academic deficits. As presented, the program begins with a student's failure of any subject examination. The instructor and student develop an intensive remediation program with counseling, tutorials, and reevaluation.

On May 20, 2010, the Board placed the program on provisional accreditation for the one – year period from May 20, 2010, through May 31, 2011. Additionally, the program was required 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 2525. The Board denied the program's request to admit 30 students commencing August 2, 2010, to **replace** students completing program requirements July 25, 2010. The program was required to admit no further classes without prior Board approval. **At that time, the program's average annual pass rate was 31%, 42 percentage points below the state average annual pass rate.** (See Attachment A)

On June 11, 2010, the program submitted electronic correspondence requesting approval to admit students to **replace** the class graduating July 25, 2010.

On June 22, 2010, the Board forwarded correspondence notifying the program of specific areas of noncompliance and requirements for correction as referenced in Section 2526.1 (e) of the Vocational Nursing Rules and Regulations. (See Attachment B)

On September 16, 2010, the Board denied the Community Based Education & Development College Vocational Nursing Program's request to admit 30 students commencing August 9, 2010, to **replace** students completing program requirements July 25, 2010. The Board approved the program's admission of 15 students on September 20, 2010, with a projected graduation of March 26, 2012. (See Attachment C)

On September 28, 2010, the Board forwarded correspondence to the director relative to decisions rendered at the November 20, 2010 Board meeting. (See Attachment D)

On January 18, 2011, the Board received the program's electronic correspondence and supporting documents requesting approval to admit a new class on March 7, 2011. (See Attachment E)

On February 14, 2011, the SNEC spoke with the director relative to clarification as to the absence of the program's request on the agenda for the February 25, 2011, Board meeting. The director was informed that reconsideration of the program's provisional accreditation status was scheduled for Board consideration at the May 20, 2011 meeting.

On February 28, 2011, the Board received the program's follow – up report, dated February 15, 2011. (See Attachment F)

As specialized therein, the program reported implementation of the following changes:

A. Revised Screening and Selection Criteria.

The director reported revision of the program's Screening and Selection Criteria relative to the Assessment Technologies Institute (ATI) – CPAt. Candidates for program admission are required to achieve the following minimum scores.

Content Category	Prior Required Minimum Score	New Minimum Score
Reading	43	50
Language Usage	42	50
Numerical skills	41	50

B. Utilization of New Assessment Tests.

The director reported students are required to complete ATI Assessment Tests at the conclusion of each module. As presented, the results assist in monitoring student progress.

On April 4, 2011, the SNEC discussed with the director the program's request for approval to admit a new class. The SNEC confirmed that the request was scheduled for consideration by the Board at the May 20, 2011 meeting. The director was requested to forward the program's plan for admission of future classes during 2011 and 2012.

On April 6, 2011, the Board received electronic correspondence from the director relative to the status of the program and the admission of future classes. (See Attachment G)

On April 8, 2011, the SNEC confirmed the program's current faculty with the director. A violation of existing regulations relative to the program's failure to notify the Board of the termination of faculty was identified and communicated to the director. The director was requested to submit correspondence addressing the violation and the program's correction. Subsequently, the Board received program correspondence relative to correction of the identified violation. (See Attachment H)

On April 18, 2011 the program was sent a certified letter requesting 15 copies of materials that the program wished to have considered at the May, 2011 Board meeting.

On **May 20, 2011**, the Board **extended** the program's provisional accreditation status for the **one-year period June 1, 2011, through May 31, 2012**. Reconsideration of the program's accreditation status was scheduled for the May 2012 Board meeting.

At that time, the program's **quarterly** pass rate was **58%**; the program's average **annual** pass rate was **48%**, an **improvement of 17 percentage points, from 31% to 48%, during its one-year provisional accreditation**. (See Attachment I)

On June 23, 2011, the Board received correspondence with supporting documents from the director requesting approval to admit additional classes. Based on submitted information and subsequent telephone clarification received July 22, 2011, the following classes were requested.

- Admit 30 students on September 19, 2011, graduating November 20, 2012, to **replace** students who graduated July 24, 2011.
- Admit 30 students November 28, 2011, graduating March 27, 2013. As presented, approval of this class was the program's "attempt to regain our module rotation sequence."
- Admit 30 students April 2012 to **replace** students graduating March 2012.

On June 29, 2011, the Board forwarded to the director the Notice of Change in Accreditation Status per certified and regular mail (see Attachment J).

On July 22, 2011, the assigned consultant discussed the program's current request with the director.

1. Program's provisional accreditation status; and
2. Program's **quarterly** and **annual** pass rates on the NCLEX-PN®.

Specifically, the director was reminded that the Board had extended the program's provisional accreditation status on May 20, 2011. At that time the program's average **quarterly** pass rate was **58%** and its average **annual** pass rate was **48%**. Based on statistics reported for the period **April 2011 through June 2011**, the program's average **quarterly** pass rate **declined to 11%**; its average **annual** pass rate **48%**.

On July 25, 2011, the Board received correspondence and supporting documents from the director relative to its request.

On August 10, 2011, the Supervising Nursing Education Consultant forwarded correspondence to the director requesting the submission of documents for Board presentation.

On August 19, 2011, the Board received electronic correspondence from the director rescinding the submitted request for approval to admit a class on September 19, 2011 and placement on the September 2011 Board agenda. Placement on the November Board agenda was requested to allow additional time for improvement of program pass rates.

The director reported the program's implementation of several strategies to improve program pass rates. Those strategies include the following:

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

The program requires all students to complete the ATI computerized examinations. Upon completion of all curricular requirements, the program requires all students to achieve a minimal score of 80% on the Comprehensive ATI Predictor Examination to be eligible for graduation. That change was implemented September 2010.

The director reported that the first class admitted under its new exit criteria began the program on November 29, 2010 and is scheduled to graduate March 26, 2012.

➤ **Improved Monitoring of Student Academic Progress.**

The director reports that the program encourages all current students to attend weekly NCLEX review classes. Additionally, students are advised to actively participate in facilitated ATI practice sessions.

On **September 16, 2011**, the Board received electronic correspondence and supporting documents from the director **requesting approval to admit students in November 2011 and April 2012.**

On November 10, 2011 the Board **denied** the program's request to admit 30 students into the non-degree class commencing November 28, 2011 only, graduating March 27, 2013, to **replace** students who graduated July 24, 2011. The Board approved the program's admission of 15 students into the non-degree class commencing November 28, 2011 only, graduating March 27, 2013, to **replace** students who graduated July 24, 2011. Further, the Board **denied** the program's request to admit 30 students into the non-degree class commencing April 3, 2012 only, graduating July 10, 2013, to **replace** students scheduled to graduate March 26, 2012 and **tabled** consideration of the program's admission of 15 students into the non-degree class commencing April 3, 2012 only, graduating July 10, 2013, to **replace** students scheduled to graduate March 26, 2012 to the May 2012 Board meeting. The Board continued the program's requirement to obtain approval by the full Board prior to admission of each class.

November 23, 2011, correspondence was forwarded to the director relative to decisions rendered at the November 10, 2011 Board meeting.

On February 13, 2012 the Board received the program's second follow up report for the second year of provisional accreditation (See Attachment K). As presented therein, the program's report addressed the following areas.

- **Recruitment and Admissions Process.** The program implemented personalized guidance and support prior to program entry to help assess the student's ability to meet the rigors of the VN program. During the report for the first year of Provisional Approval, the program had increased the program's Screening and Selection Criteria relative to the Assessment Technologies Institute (ATI) – CPA as described above.
- **Structure of Curriculum.** The program's terminal objectives were realigned in 2011 and are focused on critical thinking, planning, implementation and analysis/evaluation. The objectives were designed based on the modular format described above for the report for the first year of Provisional Approval. Current students are using the modular enhancement. A faculty committee reviews the validity and program accuracy of the objectives with each new module start.
- **Components of VN Program.** The program has implemented weekly faculty dialogue between clinical and theory faculty to align their instructional efforts. The program has also implemented an online student resource library.
- **VN Program Operations.** The program now requires theory instructors to actively assess students for academic difficulty and provide prompt intervention. Instructors have clearly defined office hours after each theory day for students to access support and guidance. Students are provided individualized student remediation plans and instructors provide tutoring. In November 2011, the program implemented a pilot program to provide additional assignments in class and at home for students demonstrating the need. In January 2012 the program increased the frequency of NCLEX review classes from one review per week to four reviews per week.
- **VN Program Evaluation Process.** In order to review the effectiveness of clinical and theory faculty, the Program Director performs a Faculty Classroom Observation at the start of each module which evaluates variety and pacing of instruction, organization, presentation skills, clarity, content knowledge, instructor-student interaction, use of terminology and discipline/program specific teaching behaviors. In addition the Program Director evaluates each clinical site at the start of each module and ensures that experiences available at the clinical site continue congruent with the clinical objectives of the program curriculum. Evaluation of the progress of the VN students is achieved through unit and module exams. Computerized ATI computerized testing was implemented for the first year provisional approval review. The program now also uses NCLEX review testing. The program revised their clinical competency form to allow for nursing skills to be identified and assessed across the entire VN program.

On March 16, 2012 the Director provided additional information for consideration in requesting admission of fifteen (15) students (Attachment L). The following information was presented:

- **Continued Evaluation.** Students' scores are continuously monitored. If during any given month or four (4) course tests, the average score for a student is below

80%, the student will be placed on probation for no longer than 30 days and will have to comply with an individual remediation plan.

- **Successful Completion of Modules.** Module completion requires an average of 80% and includes homework, module test, and ATI comprehensive assessment score. If the module average is lower than 80%, the student will be terminated from the program or be permitted to repeat one module per program.
- **Assessment for NCLEX-VN Readiness Agreement.** All students are required to participate in the school-sponsored NCLEX review course with established requirements for passing of practice tests and for passing the ATI Comprehensive Predictor Examination. Students are then expected to schedule the NCLEX-VN exam within 90 days after completion of the review course.

The following table summarizes the program's performance statistics since placement on provisional accreditation.

NCLEX-PN® Licensure Examination Data						
Quarterly Statistics					Annual Statistics*	
Quarter	# Candidates	# Passed	% Passed	State Average Quarterly Pass Rate	Program Average Annual Pass Rate	State Average Annual Pass Rate
Oct - Dec 2007	1	1	100%	76%	63%	76%
Jan - Mar 2008	23	14	61%	75%	64%	75%
Apr - June 2008	11	3	27%	70%	51%	74%
July - Sep 2008	27	14	52%	74%	52%	74%
Oct - Dec 2008	21	7	33%	73%	46%	73%
Jan - Mar 2009	23	7	30%	70%	38%	72%
Apr - Jun 2009	21	8	38%	71%	39%	70%
July - Sep 2009	23	6	26%	74%	32%	72%
Oct - Dec 2009	20	6	30%	76%	31%	73%
Jan - Mar 2010	26	10	38%	76%	33%	74%
Apr - Jun 2010	27	10	37%	74%	33%	75%
Jul - Sep 2010	32	17	53%	76%	41%	75%
Oct - Dec 2010	22	9	41%	77%	43%	76%
Jan - Mar 2011	31	18	58%	80%	48%	77%
Apr - Jun 2011	9	1	11%	71%	48%	76%
Jul - Sep 2011	20	9	45%	74%	45%	75%
Oct - Dec 2011	12	8	40%	74%	45%	75%
Jan - Mar 2012	6	3	50%	77%	38%	74%

*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.

Program performance statistics specify that 185 program candidates completed the NCLEX-PN® during the period January 2010 through March 2012. Of the total tested, 85 program candidates passed the NCLEX-PN®. As such, of the total program graduates tested from January 2010 through March 2012, 45.94% passed; 54.05% failed.

In summary, the program has failed to bring its average annual pass rate to no more than ten (10) percentage points below the State average annual pass rate for the past eighteen (18) consecutive quarters. During the period April through June, 2011 the program had its lowest quarterly pass rate of 11%. Data available for the most recent period (January – March 2012) substantiates that the program's average annual pass rate of 38% is 36 percentage points **below** the state average annual pass rate. **It is also noted that the program's average annual pass rate has improved from 31% to 38%, an improvement of 7 percentage points, during the two (2) years of provisional approval.**

On March 19 2012, the Nursing Education Consultant sent correspondence to the director reminding the director that the Board was scheduled to reconsider the program's provisional approval at the May 11, 2012 Board meeting (see Attachment M).

Based on submitted information and the performance of program graduates on the NCLEX-PN® from October 2007 through March 2012, the following violation is identified.

Section 2530(l) 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 #1: The program's average annual pass rates have been more than ten (10) percentage points below the state average annual pass rate for eighteen (18) consecutive quarters.

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

Recommendations:

1. Extend provisional accreditation of the Community Based Education & Development College Vocational Nursing Program for the one-year period from June 1, 2012 through May 31, 2013, and issue a notice to the program to identify specific areas of noncompliance and requirements for correction as referenced in Section 2526.1 (e) of the California Code of Regulations (see Attachment N).

2. Require the program to bring its average annual pass rate to no more than ten (10) percentage points below the State average annual pass rate for four (4) consecutive quarters by **May 31, 2013**.
3. Deny program's request to admit 15 students into their non-degree class commencing May 21, 2012 and graduating September 7, 2013 to **replace** students who graduated March 26, 2012
4. Require the program to demonstrate incremental progress in improvement of its pass rates on the NCLEX/PN[®].
5. Require the program to submit a follow-up report in 9 months, but no later than **February 1, 2013**. The report must include a comprehensive analysis of the program, specific actions taken to improve program pass rates, timeline for implementation, and the effect of employed interventions. The following elements must be addressed in the analysis:
 - a. Current Student 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.

Failure to show progress shall constitute cause for revocation of provisional accreditation.

6. Continue to require the program to admit no additional classes without prior approval by the full Board.
7. 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.
8. Place the program on the May 2013 Board Meeting agenda for reconsideration of provisional accreditation.

Rationale: The program has failed to bring its average annual pass rate to no more than ten (10) percentage points below the State average annual pass rate for 18 consecutive quarters. However, it is noted that the program's performance statistics evidence an improvement of 7 percentage points during the two – years of provisional accreditation.

The director has reported implementation of a new modular program enhancement. Based on submitted information, program performance statistics of students graduating March 2012 will demonstrate the impact of these changes on student achievement. At the earliest, data from this group will be available at the end of Quarter 2, 2012 (April – July 2012). As such, it is recommended that the program's provisional approval be extended for one year to allow time required for the program to demonstrate improvement based upon the program enhancements submitted on February 13, 2012 and March 16, 2012.

Based on published examination statistics and submitted data, approval of the requested class of 15 students is not supported. The program still has 53 students enrolled to demonstrate effectiveness of programmatic improvements. Further admittance of students without demonstrated improvement in NCLEX statistics would pose an unfair risk to prospective students for NCLEX failure and/or inability to complete the program. Denial of the request will allow faculty the time required to improve student achievement and improve program performance on the licensure examination.

By May 2013, the program will have four (4) additional quarters to demonstrate compliance. Board staff will continue to closely monitor the program's effectiveness by tracking class admissions, the effectiveness of employed interventions, and the program's licensure examination pass rates quarterly, analyzing Annual Reports submitted by the program, and performing accreditation surveys every four (4) years.

- Attachment A: Board Report Dated May 4, 2010; Presented May 20, 2010.
- Attachment B: Notice of Change in Accreditation Status Dated June 22, 2010.
- Attachment C: Board Report Dated September 1, 2010.
- Attachment D: Board Correspondence Dated September 28, 2010.
- Attachment E: Program Electronic Correspondence Dated January 18, 2011.
- Attachment F: Program Report Dated February 15, 2011; Received February 28, 2011.
- Attachment G: Program Electronic Correspondence Dated April 6, 2011.
- Attachment H: Program Electronic Correspondence Dated April 8, 2011.
- Attachment I: Board Report Dated May 3, 2011; Presented May 20, 2011.
- Attachment J: Notice of Change in Accreditation Status Dated June 29, 2011.
- Attachment K: Program Correspondence Dated February, 13, 2012.
- Attachment L: Program Correspondence Dated March 16, 2012.
- Attachment M: Board Correspondence Dated March 19, 2012.
- Attachment N: Draft Notice of Change in Accreditation Status.

Agenda Item #12.A.2 Attachment A



STATE AND CONSUMER SERVICES AGENCY | ARNOLD SCHWARZENEGGER, GOVERNOR
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DATE: May 4, 2010

TO: Board Members

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

SUBJECT: Community Based Education & Development College Vocational Nursing Program – Consideration of Placement on Provisional Accreditation
(Director: Alice Sorrell – Thompson, Los Angeles, Los Angeles County, Private)

Community Based Education & Development College 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 average annual pass rates from the state average annual pass rates of first time graduates of accredited vocational nursing programs for the past nine (9) 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
Oct – Dec 2007	76%	63%	- 13
Jan – Mar 2008	75%	64%	- 11
Apr - Jun 2008	74%	51%	- 23
Jul - Sep 2008	74%	52%	- 22
Oct – Dec 2008	73%	46%	- 27
Jan – Mar 2009	72%	38%	- 34
Apr – Jun 2009	70%	39%	-31
Jul - Sep 2009	72%	32%	- 40
Oct – Dec 2009	73%	31%	- 42

The program requests Board approval to admit a class of 30 students commencing August 2, 2010, with a projected graduation of November 21, 2011. The proposed class would **replace** students completing program requirements July 25, 2010.

History of Prior Board Actions

- On September 10, 2004, the Executive Officer approved the Community Based Education and Development College's request to begin a vocational nursing program with an initial full – time class of 30 students on October 4, 2004, only; and approved the program curriculum for 1560 hours, including 582 theory and 978 clinical hours.
- **On February 8, 2005, a new program director was approved.**
- On March 24, 2005, the director notified the Board that commencement of the initial class had been delayed from October 4, 2004, to May 2, 2005, with a completion date of June 29, 2006.
- On February 7, 2006, the director notified the Board that the completion date for the initial class was changed to July 20, 2006.
- On May 12, 2006, the Executive Officer approved initial full accreditation for the Community Based Education and Development College Vocational Nursing Program for the period May 12, 2006, through May 11, 2010, and issued a certificate accordingly.

Additionally, the Executive Officer approved the program's request to admit 60 students starting July 31, 2006, to replace students graduating July 20, 2006, only thereby increasing class size from 30 to 60 students per class. The projected completion date for the replacement class is September 28, 2007.

- On January 9, 2007, the Executive Officer approved the program's request to admit 60 students into a full – time class commencing January 15, 2007, with a projected completion date of March 21, 2008.
- On April 10, 2008, the Executive Officer approved the program's request to admit 10 students into a full-time class beginning on May 5, 2008, with a projected graduation date of August 18, 2009, thereby increasing frequency of admissions.
- On March 18, 2009, the program was notified that its annual average pass rate had fallen below 10 percentage points of the state annual average pass rate for the past four (4) quarters. The program was requested to submit a written plan for improving their NCLEX-PN® pass rates by April 2, 2009.
- On May 14, 2009, the program was notified that its annual average pass rate had fallen below 10 percentage points of the state annual average pass rate for the past five (5) quarters.
- **On August 10, 2009, a new program director was approved.**
- On July 16, 2009, the program was notified that its annual average pass rate had fallen below 10 percentage points of the state annual average pass rate for the past six (6) quarters. The program was requested to submit documentation that verified that the elements of its plan of correction were being carried out and the effects of the employed interventions
- On September 8, 2009, the program was notified that its annual average pass rate had fallen below 10 percentage points of the state annual average pass rate for the past seven (7) quarters.
- On February 24, 2010, the program was notified that its annual average pass rate had fallen below 10 percentage points of the state annual average pass rate for the past eight (8) quarters.

Enrollment

Currently, the program requires prior Board approval for the admission of each class. The program offers a 63 – week full – time class of instruction, successful completion resulting in issuance of a diploma. Additionally, the program offers a 74 – week full – time class of instruction, successful completion resulting in an Associate of Arts degree. 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 current and proposed class starts and completions. The table indicates **a maximum enrollment of 140 students** from **April 2009 through August 2010**.

ENROLLMENT DATA				
CLASS DATES		#Students Admitted	#Students Current or Completed	Total Enrolled
Start	Complete			
4/09 (Unapproved - D)		40	30	30
8/09 (Unapproved - D)		33	30	30 + 30 = 60
10/09 (Unapproved - AA)		9	7	60 + 7 = 67
11/09 (Unapproved - D)		40	38	67 + 38 = 105
4/10 (Unapproved - D)		35	35	105 + 35 = 140
	7/10 (4/09 Class)		-30	140 - 30 = 110
8/10 (Proposed - D)			30	110 + 30 = 140

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 December 2009, specify the pass percentage rates for graduates of Community Based Education & Development 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 Average Quarterly Pass Rate	Program Average Annual Pass Rate	State Average Annual Pass Rate
Oct - Dec 2007	1	1	100%	76%	63%	76%
Jan - Mar 2008	23	14	61%	75%	64%	75%
Apr - June 2008	11	3	27%	70%	51%	74%
July - Sep 2008	27	14	52%	74%	52%	74%
Oct - Dec 2008	21	7	33%	73%	46%	73%
Jan - Mar 2009	23	7	30%	70%	38%	72%
Apr - Jun 2009	21	8	38%	71%	39%	70%
July - Sep 2009	23	6	26%	74%	32%	72%
Oct - Dec 2009	20	6	30%	76%	31%	73%

*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 (October – December 2009), the program's average annual pass rate is 31%. The California average annual pass rate for graduates from accredited vocational nursing programs who took the NCLEX-PN® for the first time during the same period is 73%. The pass rate for the Community Based Education & Development College Vocational Nursing Program is 42 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 total number of Board-approved faculty is seventeen (17), including the program director. Thirteen (13) instructors are available to teach in the clinical area. Based on a maximum enrollment of 140 students, ten (10) instructors are needed. Therefore, the number of 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 was verified by the consultant.

Other Considerations

As noted above, the program's average annual pass rate on the NCLEX-PN® is 42 percentage points below the state average annual pass rate. On December 12, 2008, the program submitted a plan for improving program pass rates.

As specified therein, the following interventions were implemented.

1. **Curriculum.** The number of theory hours was increased from 582 to 600 hours. The sequence of content was revised to better ensure students' progressive mastery of content. Critical thinking was integrated throughout the curriculum.

2. **Instructional Methods and Materials.** Presentations on critical thinking were added to faculty meetings. Instructors were required to implement role-play, case studies, and other methodologies into theory presentations to enhance student comprehension.

On August 10, 2009, the current program director was approved.

On February 24, 2010, the consultant notified the program that its annual average pass rate had fallen below 10 percentage points of the state annual average pass rate for the past eight (8) quarters. The program was requested to complete an analysis of all program elements and submit a written plan for improving their NCLEX-PN® pass rates. That plan was received April 14, 2010 with a revision submitted April 28, 2010 (see Attachment A).

As presented therein, the program's report addressed the following areas.

A. Revised Admission Criteria.

The program has revised its Admission Criteria. Effective with the next class, applicants for program admission will be required to meet the following criteria.

1. No less than 18 years of age.
2. High school graduation or equivalent thereof.
3. Complete the Assessment Technologies Institute (ATI) – CPAt with a minimum score of 40%.

B. Revised Curriculum.

The director is completing a thorough analysis of the modular curriculum. To date, the analysis of Module I has been completed. Based thereon, the sequence of theory content has been revised to include a foundation of Anatomy and Physiology. Revision of the remaining modules is in progress.

C. Revised Grading Policy.

Students are required to achieve a minimum score of 80% on all examinations. Additionally, a minimum grade point average of 80% is required.

D. Improved Identification of Students with Performance Deficits.

The program requires all students to complete a comprehensive final examination per module with a minimum score of 80%. Additionally, students are required to complete the following ATI Level Examinations.

1. Fundamentals of Nursing Practice.
2. Mental Health Nursing Practice.

3. Pharmacology of Nursing Practice.
4. Nutrition for Nursing.
5. Adult Medical – Surgical Nursing.
6. Maternal – Newborn Nursing.
7. Nursing Care of Children.
8. Leadership and Management for Nursing Practice.

While the program does not require a minimum score on the ATI Level Examinations for class progression, the information is used to assess students' grasp of critical nursing concepts.

E. Improved Monitoring of Student Academic Progress.

The director reports the development of an academic improvement program whereby students are provided early intervention for academic deficits. As presented, the program begins with a student's failure of any subject examination. The instructor and student develop an intensive remediation program with counseling, tutorials, and reevaluation.

Based on submitted information and the performance of program graduates on the NCLEX-PN® from October 2007 through December 2009, the following violations of the California Rules and Regulations are identified.

Section 2530 (k) 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 (l).**

Violation #1: From November 2008 through April 2010, the program admitted six (6) classes without prior Board approval.

Correction: The assigned consultant informed the current director that the program was in violation of existing regulations in that prior Board approval had not been obtained for commencement of six (6) previous classes. The director stated her understanding that all prior classes had prior Board approval; however, the program was unable to submit correspondence to substantiate such approval. Board records **do not** confirm approval of class admissions after April 10, 2008.

On April 26, 2010, the director submitted correspondence requesting the admission of 30 students commencing August 2, 2010, to **replace** the class completing program requirements July 25, 2010. That class is projected to graduate November 21, 2011.

Section 2530(I) 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 #2: The program’s average annual pass rate has been more than ten (10) percentage points below the state average annual pass rate for nine (9) consecutive quarters.

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

Recommendations:

1. Place Community Based Education & Development College Vocational Nursing Program on provisional accreditation for the one-year period from May 20, 2010, through May 31, 2011, and issue a notice to the program to identify specific areas of noncompliance and requirements for correction as referenced in Section 2526.1 (e) of the California Code of Regulations (see Attachment B Draft).
2. Require the program to show documented progress by submitting a follow-up report in ten (10) months. The report must include a comprehensive analysis of the program, specific actions taken to improve program pass rates, timelines for expected results, and the effectiveness of corrective actions taken to address the following elements:
 - a. Current Student 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.
3. 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 2525.

Rationale: The Board has serious concerns relative to the program's non-compliance with regulations relative to pass rate on the NCLEX-PN® for the last eight (8) quarters. During that time, 170 program graduates have completed the NCLEX-PN®. Of the total tested, 60 (35.29%) program graduates have passed the licensure examination.

4. Deny the program's request to admit 30 students commencing August 2, 2010, to replace students completing program requirements July 25, 2010.

Rationale: The Board has serious concerns relative to the program's non-compliance with regulations relative to the admission of classes without prior Board approval. Given the program's low average annual pass rates, denial of the proposed class admissions will allow the program to complete a total analysis and implement corrective interventions to enhance student achievement.

5. The program shall admit no further classes without prior Board approval.

Attachment A – Program correspondence received April 26, 2010.

Attachment B – Notice of Change in Accreditation Status Draft.

Agenda Item #12.A.2. Attachment B



STATE AND CONSUMER SERVICES AGENCY • ARNOLD SCHWARZENEGGER, GOVERNOR
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June 22, 2010

Alice L. Sorrell – Thompson, M.B.A., R.N.
Vocational Nursing Program
Community Based Education and Development College
5724 West 3rd Street, Third Floor
Los Angeles, CA 90036

Subject: Notice of Change in Accreditation Status

Dear Ms. Sorrell - Thompson:

Pursuant to the action of the Board of Vocational Nursing and Psychiatric Technicians (Board) on May 20, 2010, the status of the Community Based Education & Development College Vocational Nursing Program has been changed from full accreditation to provisional accreditation for the for the one-year period from May 20, 2010, through May 31, 2011. Please sign and return the enclosed "Acknowledgement of Change in Accreditation Status" form by **Wednesday, June 30, 2010**.

AREAS OF NON-COMPLIANCE [VIOLATION(S)]

In accordance with Section 2526.1(c) of title 16 of the California Code of Regulations,

"The Board may place any program on provisional accreditation when that program does not meet all requirements as set forth in this chapter and in Section 2526..."

1. The program failed to comply with Section 2530 (k) of the California Code of Regulations in that six (6) classes were admitted without prior Board approval from November 2008 through April 2010.
2. The program failed to comply with Section 2530 (l) of the California Code of Regulations in that it failed to maintain an average annual pass rate on the licensure examination that was no more than ten (10) percentage points below the state average annual pass rate for first time candidates of accredited vocational nursing schools for the same period..

The program pass rates of the Community Based Education and Development College Vocational Nursing Program for the past nine (9) quarters are set forth in the following table.

Quarter	State Annual Average Pass Rate	Program Annual Average Pass Rate
Oct – Dec 2007	76%	63%
Jan – Mar 2008	75%	64%
Apr – Jun 2008	74%	51%
Jul – Sep 2008	74%	52%
Oct – Dec 2008	73%	46%
Jan – Mar 2009	72%	38%
Apr – June 2009	70%	39%
Jul – Sep 2009	72%	32%
Oct – Dec 2009	73%	31%

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

REQUIRED CORRECTION(S)

1. The Community Based Education and Development Vocational Nursing Program shall admit classes with prior Board approval only.
2. The program must bring its licensure examination annual average pass rate to no more than ten (10) percentage points below the State annual average pass rate for four (4) consecutive quarters by **May 31, 2011**.
3. The program must show documented progress by submitting a follow-up report in ten (10) months, but no later than **February 15, 2011**. The report must include a comprehensive analysis of the program, specific actions taken to improve program pass rates, timelines for expected results, and the effectiveness of corrective actions taken to address the following elements:
 - a. Current Student 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.
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 2011** 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: **Board approval is required prior to the admission of each class.**

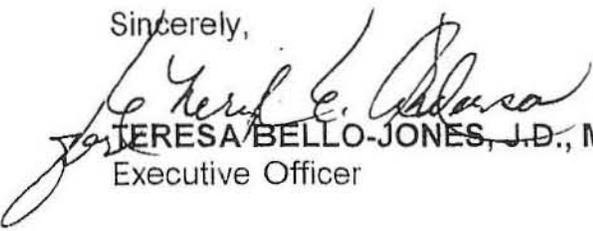
In the event your program is required to submit any report(s) as a corrective action pursuant to this notice, such reports are required in addition to any other reports required pursuant to 2527 of the Board's regulations.

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

cca

Enclosure

cc: Board Members

Agenda Item #12.A.2 Attachment C



STATE AND CONSUMER SERVICES AGENCY • ARNOLD SCHWARZENEGGER, GOVERNOR
BOARD OF VOCATIONAL NURSING & PSYCHIATRIC TECHNICIANS
2535 Capitol Oaks Drive, Suite 205, Sacramento, CA 95833-2945
Phone (916) 263-7800 Fax (916) 263-7859 | Web www.bvnpt.ca.gov



DATE: September 1, 2010

TO: Board Members

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

SUBJECT: Community Based Education & Development College Vocational Nursing Program – Consideration of Request to Admit Students
(Director: Alice Sorrell – Thompson, Los Angeles, Los Angeles County, Private)

On May 20, 2010, the Board placed the Community Based Education & Development College Vocational Nursing Program on provisional accreditation for the one-year period from May 20, 2010, through May 31, 2010. Additionally, the Board denied the program's request to admit 30 students commencing August 2, 2010, to replace students completing program requirements July 25, 2010. The program was required to admit no further classes without prior Board approval. The Board took that action due to the program's noncompliance with Section 2530 (l) of the Vocational Nursing Rules and Regulations.

On June 11, 2010, the program requested approval to admit new students. The Executive Officer deferred action on the program's request for consideration by the Board at the September 16, 2010 Board meeting. That action was based on the program's pass rate statistics and previous Board action to deny students with a 33% pass rate. The consultant notified the director of the decision per telephone.

The program requests approval to admit a full – time class of 30 students commencing August 9, 2010 only, to **replace** students completing course requirements on July 25, 2010. The proposed class is projected to complete program requirements November 12, 2011.

History of Prior Board Actions

- On September 10, 2004, the Executive Officer approved the Community Based Education and Development College's request to begin a vocational nursing program with an initial full – time class of 30 students on October 4, 2004, only; and approved the program curriculum for 1560 hours, including 582 theory and 978 clinical hours.
- On February 8, 2005, a new program director was approved.

- On March 24, 2005, the director notified the Board that commencement of the initial class had been delayed from October 4, 2004, to May 2, 2005, with a completion date of June 29, 2006.
- On February 7, 2006, the director notified the Board that the completion date for the initial class was changed to July 20, 2006.
- On May 12, 2006, the Executive Officer approved initial full accreditation for the Community Based Education and Development College Vocational Nursing Program for the period May 12, 2006, through May 11, 2010, and issued a certificate accordingly.

Additionally, the Executive Officer approved the program's request to admit 60 students starting July 31, 2006, to replace students graduating July 20, 2006, only thereby increasing class size from 30 to 60 students per class. The projected completion date for the replacement class is September 28, 2007.

- On January 9, 2007, the Executive Officer approved the program's request to admit 60 students into a full – time class commencing January 15, 2007, with a projected completion date of March 21, 2008.
- On April 10, 2008, the Executive Officer approved the program's request to admit 10 students into a full-time class beginning on May 5, 2008, with a projected graduation date of August 18, 2009, thereby increasing frequency of admissions.
- On March 18, 2009, the program was notified that its annual average pass rate had fallen below 10 percentage points of the state annual average pass rate for the past four (4) quarters. The program was requested to submit a written plan for improving their NCLEX-PN[®] pass rates by April 2, 2009.
- On May 14, 2009, the program was notified that its annual average pass rate had fallen below 10 percentage points of the state annual average pass rate for the past five (5) quarters.
- On July 16, 2009, the program was notified that its annual average pass rate had fallen below 10 percentage points of the state annual average pass rate for the past six (6) quarters. The program was requested to submit documentation that verified that the elements of its plan of correction were being carried out and the effects of the employed interventions.
- **On August 10, 2009, a new program director was approved.**
- On September 8, 2009, the program was notified that its annual average pass rate had fallen below 10 percentage points of the state annual average pass rate for the past seven (7) quarters.
- On February 24, 2010, the program was notified that its annual average pass rate had fallen below 10 percentage points of the state annual average pass rate for the past eight (8) quarters.

- On April 26, 2010, the assigned consultant contacted the director relative to the admission of five (5) classes without prior Board approval.
- On April 27, 2010, the Board received electronic correspondence from the director relative to the program's understanding that ongoing admissions had been approved.
- On May 14, 2010, the Board received electronic correspondence from the director alleging approval by a prior consultant. A copy of a Board report dated April 10, 2008 was attached. The Board's official report dated April 10, 2010 does not reflect the same information as submitted by the director.
- On May 20, 2010, the Board placed the program on provisional accreditation for the one-year period from May 20, 2010, through May 31, 2011, and issued a notice to the program to identify specific areas of noncompliance and requirements for correction as referenced in Section 2526.1 (e) of the California Code of Regulations; required the program to show documented progress by submitting a follow-up report in ten (10) months to include a comprehensive analysis of the program, specific actions taken to improve program pass rates, timelines for expected results, and the effectiveness of corrective actions taken to address the following elements:
 - a. Current Student 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.

Additionally, the program is required to 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 2525.

The Board denied the program's request to admit 30 students commencing August 2, 2010, to replace students completing program requirements July 25, 2010. The program was required to admit no further classes without prior Board approval.

- On June 11, 2010, the program submitted electronic correspondence requesting approval to admit students to replace the class graduating July 25, 2010.

- On June 22, 2010, the Board forwarded correspondence notifying the program of specific areas of noncompliance and requirements for correction as referenced in Section 2526.1 (e) of the Vocational Nursing Rules and Regulations.
- On July 12, 2010, the Board received correspondence from the program with a copy of program correspondence dated June 10, 2010, current and projected enrollment information, information relative to faculty: student assignments, clinical rotations, and a FedEx shipment travel history.
- On July 28, 2010, the Board received notification per telephone that the program had mailed documents to the residence of President Vertido, stating the school had been unable to find another mailing address for the Board.
- On July 30, 2010, the Board received program correspondence dated July 26, 2010, sent to the residence of President Vertido, relative to a request to admit students July 26, 2010.
- On August 3, 2010, the director notified the Board that the number of students requested had been reduced to 30.
- On August 6, 2010, the Executive Officer deferred action on the program's request to admit students to the Board for consideration at the September 16, 2010 meeting. This decision was based on the program's pass rate statistics and previous Board action to deny students with a 33% pass rate. The consultant notified the director of the decision per telephone.
- On August 6, 2010, the Executive Officer was notified that the program administration had contacted President Vertido at his residence regarding the program's placement on the September 2010 agenda.
- On August 13, 2010, the Board forwarded correspondence to the director relative to contact with Board members.
- On August 19, 2010, the Board's legal counsel and the Supervising Nursing Education Consultant conducted a conference call with the program director, school DOE, and the school's legal counsel. The purpose of the call was to clarify the program's request for documents and achieve resolution.

Enrollment

Currently, the program requires prior Board approval for the admission of each class. The program offers a 63 – week full – time class of instruction, successful completion resulting in issuance of a diploma. Additionally, the program offers a 74 – week full – time class of instruction, successful completion resulting in an Associate of Arts degree. 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 current and proposed class starts and completions. The table indicates a **maximum enrollment of 136 students** from **April 2009 through August 2010**.

ENROLLMENT DATA				
CLASS DATES		#Students Admitted	#Students Current or Completed	Total Enrolled
Start	Complete			
4/09 (Unapproved - D)		40	32	32
8/09 (Unapproved - D)		37	33	32 + 33 = 65
10/09 (Unapproved - AA)		9	8	65 + 8 = 73
11/09 (Unapproved - D)		40	39	73 + 39 = 112
4/10 (Unapproved - D)		35	24	112 + 24 = 136
	7/10 (4/09 Class)		-30	136 - 30 = 106
8/10 (Proposed - D)		30		106 + 30 = 136

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 March 2010, specify the pass percentage rates for graduates of Community Based Education & Development 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 Average Quarterly Pass Rate	Program Average Annual Pass Rate	State Average Annual Pass Rate
Oct - Dec 2007	1	1	100%	76%	63%	76%
Jan - Mar 2008	23	14	61%	75%	64%	75%
Apr - June 2008	11	3	27%	70%	51%	74%
July - Sep 2008	27	14	52%	74%	52%	74%
Oct - Dec 2008	21	7	33%	73%	46%	73%
Jan - Mar 2009	23	7	30%	70%	38%	72%
Apr - Jun 2009	21	8	38%	71%	39%	70%
July - Sep 2009	23	6	26%	74%	32%	72%
Oct - Dec 2009	20	6	30%	76%	31%	73%
Jan - Mar 2010	26	10	38%	76%	33%	74%
Apr - Jun 2010	27	10	37%	74%	33%	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 average annual pass rate is 33%. The California average annual 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 pass rate for the Community Based Education & Development College Vocational Nursing Program is 42 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 total number of Board-approved faculty is eighteen (18), including the program director. Of that total, sixteen (16) instructors are available to teach in the clinical area.

Based on a maximum enrollment of 136 students, ten (10) instructors are needed. Therefore, the number of 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 was verified by the consultant.

Other Considerations

On May 20, 2010, the Board placed the program on provisional accreditation for the one-year period from May 20, 2010, through May 31, 2011. That action was taken due to the performance of program graduates on the licensure examination. Additionally, the Board denied the program's request to admit 30 students commencing August 2, 2010, to replace students completing program requirements July 25, 2010. The program was required to admit no further classes without prior Board approval. (See Attachment A)

On June 11, 2010, the program submitted electronic correspondence requesting approval to admit a class of 40 students to replace students scheduled to graduate on July 25, 2010.

On June 22, 2010, the Board forwarded to the director a Notice of Change in Accreditation Status (see Attachment B).

On July 12, 2010, the Board received correspondence from the director dated July 7, 2010. A copy of program correspondence dated June 11, 2010, current and projected

enrollment information, information relative to faculty: student assignments, clinical rotations, and a FedEx shipment travel history were attached. (See Attachment C)

On July 28, 2010, the Board staff received notification per telephone that the program had mailed documents to the residence of the Board President, stating the program had been unable to locate another mailing address for the Board. On July 30, 2010, the Board received program correspondence dated July 26, 2010, sent to the residence of the Board President, relative to a request to admit students July 26, 2010. (See Attachment D)

On August 3, 2010, the assigned consultant spoke to the director relative to the program's request. The director was reminded of the Board's May 2010 decision. The director stated that the request was submitted in accordance with direction provided by the Board President and Executive Officer at the May 20, 2010 Board meeting. Subsequently, the director notified the Board that the number of students requested was reduced to 30.

On August 6, 2010, the Executive Officer deferred action on the program's request to admit students to the Board for consideration at the September 16, 2010 meeting. This decision was based on the program's pass rate statistics and the May 20, 2010 Board action to deny the program's request to admit students with a 31% pass rate.

On August 6, 2010, the consultant notified the director of the decision per telephone. Subsequently, the Executive Officer was notified that program administrators had attempted to contact the Board President per telephone at his residence, stating that the Board's actions had resulted in staff terminations and would close the program

On August 7, 2010, Board staff telephoned the director relative to the program's placement on the September 2010 agenda. A message was left requesting the director return the call.

On August 9, 2010, the director and School Director of Education (DOE) appeared at Board headquarters requesting a meeting with the Supervising Nursing Education Consultant (SNEC). The SNEC and NEC met with program representatives.

The DOE stated that the Board's denial of the program's request to admit a class would force the program to terminate faculty and that the program would lose clinical facilities. The DOE stated that she and the director had been told by the Board president and Executive Officer that additional classes would be approved upon the program's submission of a request with required documents.

Additionally, the DOE stated that the program must admit a class every 15 weeks for financial reasons. Further, she alleged discriminatory treatment by the Board stating that the program is being treated differently, and other programs are approved to continue admissions.

The SNEC advised program representatives of the Board's mandate to protect the health, safety, and welfare of consumers. Program representatives were reminded of the Board's decision and the rationale for that decision. Further, they were reminded that the Executive Officer had deferred action on the program's current request to the Board for consideration at the September 16, 2010 meeting and that the Board had made no decision to close the program.

Board representatives discussed critical program elements that may impact student achievement. Additionally, the possible utilization of unassigned program faculty to improve student achievement was discussed.

The DOE stated that a response to their request should have been received earlier, that the program had implemented changes in 2008, and that the full impact of those changes had not been observed to date. She related interventions previously reported to the Board. Additionally, she reported that the program had improved its pass rates on the licensure examination from 25% to 33%.

The SNEC advised that action on the program's request was consistent with the time frame required by existing regulations. Additionally, regulatory requirements set forth in California Code of Regulations Section 2530 (I), relative to program pass rates were reviewed.

The DOE requested to speak with the Executive Officer relative to the program's request to admit students.

The Executive Officer met with program representatives. Board requirements for all programs were stressed. Additionally, the Executive Officer reviewed the Board's concerns relative to the program's pass rates on the licensure examination. The Executive Officer advised that the program should direct all communications to Board Members to the Board's office.

Subsequently, the DOE and director requested a meeting with the Board's legal counsel. Reportedly, program representatives alleged they had been unable to obtain copies of Board meeting minutes to substantiate their claim that the program had been approved for ongoing admissions.

On August 13, 2010, correspondence was forwarded to the director relative to communications with Board members. The director was advised that Board members may not receive communications from programs prior to rendering an official decision. Such communication constitutes a violation of the Open Meeting Act and may result in the recusal of the Board member in voting relative to action on the program's request. (See Attachment E)

On August 19, 2010, the SNEC and legal counsel conducted a conference call with the program director, school DOE, and the school's legal counsel. The purpose of the call was to clarify the program's request and achieve resolution.

Subsequently, official minutes and agenda items were reviewed from all Board meetings, including May 9, 2008, September 12, 2008; November 21, 2008; February 20, 2009; May 22, 2009; October 7, 2009; February 18, 2010; and May 20, 2010. Action relative to the program was reported in minutes and agenda items for the May 9, 2008 Board meeting. Specifically, on Agenda Item #7B states, "The Executive Officer approved the program's request to admit 10 students into a full – time class beginning on May 5, 2008, with a projected graduation date of August 18, 2009, thereby increasing frequency of admissions." (See Attachments F and G) No further action was recorded relative to Community Based Education & Development Vocational Nursing Program.

Additionally, the Board's Information Technology Analyst researched the email string of communications with the prior consultant as provided by the program. The Board was unable to verify receipt.

In summary, the program reports that interventions were implemented to improve program pass rates; however, to date, program performance statistics do not evidence improvement. For the period January – March 2010, the program's average **quarterly** pass rate on the NCLEX-PN® was **38%**, while their average **annual** pass rate was **33%**. For the period April – June 2010, the program's **quarterly** pass rate on the NCLEX-PN® was **37%**, while their average **annual** pass rate was **33%**. As such, the program's average annual pass rate is 42 percentage points below the state average annual pass rate.

Recommendations:

1. In accordance with the Board's May 20, 2010 decision, deny the Community Based Education & Development College Vocational Nursing Program's request to admit 30 students commencing August 9, 2010, to replace students completing program requirements July 25, 2010.

Rationale: The Board has serious concerns relative to the program's non – compliance with regulations relative to the admission of classes without prior Board approval and the program's low average annual pass rates. Given the program's low average annual pass rates, denial of the proposed class admissions will allow the program to complete a total analysis and implement corrective interventions to enhance student achievement.

2. Approve the program's admission of 15 students on September 20, 2010, with a projected graduation of November 20, 2011.

Rationale: Pursuant to the Notice of Change in Accreditation Status dated June 22, 2010, the program will be required to submit a follow – up report to include a comprehensive analysis of the program, specific actions taken to improve program pass rates, timelines for expected results, and the effectiveness of corrective actions taken to address the following elements:

- a. Current Student 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.

Additionally, the program is required to obtain Board approval prior to the admission of each class. The program was placed on the February 2011 Board agenda for reconsideration of its provisional accreditation status.

Attachment A – Official Board Agenda Item #14B, Community Based Education & Development College Vocational Nursing Program – Consideration of Placement on Provisional Accreditation, dated May 4, 2010.

Attachment B - Notice of Change in Accreditation Status dated June 22, 2010.

Attachment C - Program Correspondence Dated July 7, 2010

Attachment D – Program Correspondence dated July 26, 2010.

Attachment E – Board correspondence dated August 13, 2010.

Attachment F - Official Board Meeting Minutes dated May 9, 2008.

Attachment G – Official Agenda Item #7B, Report on Executive Officer's Decisions for Vocational Nursing and Psychiatric Technician Programs dated May 9, 2008.

Agenda Item #12.A.2. Attachment D



BOARD OF VOCATIONAL NURSING & PSYCHIATRIC TECHNICIANS
2535 Capitol Oaks Drive, Suite 205, Sacramento, CA 95833-2945
Phone (916) 263-7800 Fax (916) 263-7866 | Web www.bvnpt.ca.gov



September 28, 2010

Alice L. Sorrell – Thompson, M.B.A., R.N., Director
Vocational Nursing Program
Community Based Education and Development College
5724 West 3rd Street, Third Floor
Los Angeles, CA 90036

Subject: Board Meeting Follow – Up

Dear Ms. Sorrell - Thompson:

The Board of Vocational Nursing and Psychiatric Technicians (Board) considered the consultant's report relative to **Community Based Education & Development College Vocational Nursing Program – Consideration of Request to Admit Students**, at its September 16, 2010 meeting.

The following decisions were rendered by the Board.

1. In accordance with the Board's May 20, 2010 decision, deny the Community Based Education & Development College Vocational Nursing Program's request to admit 30 students commencing August 9, 2010, to replace students completing program requirements July 25, 2010.
2. Approve the program's admission of 15 students on November 22, 2010, with a projected graduation of March 26, 2012.

Please contact the Board should further clarification be needed.

Sincerely,

A handwritten signature in black ink, appearing to read "Cheryl G. Anderson".

CHERYL G. ANDERSON, M.S., R.N.

Supervising Nursing Education Consultant

Agenda Item #12.A.2. Attachment 1

Cheryl Anderson

From: alice sorrell-thompson [healingheartsla@yahoo.com]
Sent: Tuesday, January 18, 2011 3:49 PM
To: Cheryl Anderson
Subject: Fw: Request for new start
Attachments: Request to start aclass_030711 2.doc; Blank Enrollment Data Table newstart.doc; Faculty and Faculty Form faculty page-1.pdf2.pdf; Faculty Clinical Assignments newstart.doc; XI0000006(1).xls; OB-PED Tracking form Ortho only.pdf2.pdf; ACCET evaluation report.docxexerpts.docx; Board Report.pdf

----- Forwarded Message -----

From: alice sorrell-thompson <healingheartsla@yahoo.com>
To: cheryl_anderson@dca.ca.gov
Sent: Tue, January 18, 2011 3:40:26 PM
Subject: Request for new start

Good Day Ms. Cheryl,

I hope this email finds you well. Attached is Community Based Education and Development's request for a new start class. I am attaching updated program information as well as supportive documentation of our progress to improve our VN program and our NCLEX pass rates. Please contact me should you need any further information. Thank you for all your guidance.

Truly,

Alice Sorrell-Thompson

Alice Sorrell-Thompson, MBA, RN
Director, Vocational Nursing Program
Community Based Education and Development

Agenda Item #12.A.2. Attachment F

CBD College



We All Speak the Same Language!

5724 West 3rd Street, Third Floor • Los Angeles, California 90036 • Tel. (323) 937-7772 • Fax (323) 937-4472

2011 FEB 28 AM 10:48

February 15th, 2011

Board of Vocational Nursing and Psychiatric Technicians
Ms. Cheryl Anderson-Supervising Nursing Education Consultant
2535 Capitol Oaks Drive, Suite 205
Sacramento, CA 95833

ede
BVNPT Received
on 2-28-11 with KR

Dear Ms. Anderson,

The following document is the results of Community Based Education and Development (CBD) Vocational Nursing program review. This was a very enlightening process and has prompted much dialogue and active consideration of the system currently in place. The leadership and faculty of CBD College are committed to achieving and maintaining successful program outcomes. As you review this document should you have any questions or need for clarification, please do not hesitate to contact me. Thank you for all your support and guidance.

Sincerely,

A large, flowing handwritten signature in cursive script, which appears to read 'Alice L. Sorrell-Thompson'.

Alice L. Sorrell-Thompson, MBA, RN, PHN
Director, Vocational Nursing Program
Community Based Education and Development



**Community Based
Education & Development**

**FOLLOW-UP
REPORT**



Community Based Education and Development

VN Program Review Report

Introduction:

Community Based Education and Development (CBD College) VN program was founded to address the needs of adult learner seeking an avenue of entry into the nursing profession. CBD College is committed to implementing a nursing education program that is in alignment with the requirements of the BVNPT, providing our students the foundation necessary to assume the role of Vocational Nurses.

In June 2010, CBD College received notification from the BVNPT that due to consistently low pass rates on the NCLEX-PN; board accreditation status was changed to “provisional status” for a twelve (12) month period. In response to this, CBD College has undergone an exhaustive review of all components of the VN Program. This report will outline the review process used, review findings and interventions, and outcomes/recommendations.

Process:

CBD College established an Ad Hoc committee to spearhead the program review process. This committee consists of theory and clinical faculty representation members across all four (4) modules as well as administrative leadership. The Ad Hoc committee utilized the suggested elements listed in provided by the BVNPT (exhibit #1-Attachment A dated 5/4/2010) as the framework for the report.

These elements were grouped into five (5) review areas: Recruitment and admissions process to VN program, Structure of VN program curriculum, Components of VN program, VN program operations policy and, VN program evaluation process. In addition to this, the committee incorporated focused interviews with clinical agency staff, CBD faculty and held focus groups comprised of a random sampling of the VN student population. The goal of this process was to gain objective and subjective data with respects to the implementation and instruction of the content of the VN program.

Program Review Areas:

A. Recruitment and admissions process: CBD College has a recruitment plan that targets adult learners with the desire to become effective Vocational Nurses. Our program entry requirements continue to enforce participants be at least 17 years of age, earned a high school diploma or it’s equivalent, be in possession of personal documents: Social security card and legal proof of residency, successfully pass the ACT’s CPAt Career Programs Assessment Test.

Action: The passing score for the CPAt was raised from: Language usage 42, Reading 43, Numerical Skills 41 to 50 in all these areas. This corrective action was implemented during the program’s reporting period of 2009-2010. It has been identified through student focus groups that students applying for entry into the VN program experience frustration and anxiety once they begin. Currently, CBD offers workshops during the VN



program orientation that targets skills such as: study strategies, test taking, time management and utilization of student support resources. The Ad Hoc committee is in the process of reviewing the Wonderlic Cognitive Ability Test to augment the current intervention listed above. The Wonderlic test will assess potential student ability to learn and problem-solve. Proposes implementation of this intervention will be with the start of the new module. The leadership of CBD College recognized the difficulty of adult learners making the transition to full-time students in this rigorous program. The services of a student services counselor were retained in early 2010 to provide the VN students with access to ancillary support resources: social services, medical, counseling to assist them in successfully maintaining their VN student roles.

B. Structure of the VN Program Curriculum: The terminal objectives for the VN program were re-aligned to more closely follow the nursing process. Looking at the terminal objectives as program outcomes, the Ad Hoc identified ten (10) program outcomes:

1. Assess basic physical, emotional, spiritual and cultural needs of the client utilizing head-to-toe and focused assessments.
2. Collect data from available resources, including client, family, health care records health care team members, established protocols, guidelines and document findings accurately and concisely.
3. Demonstrate effective communication skills with client's and team members in the practice of Nursing.
4. Prioritize and carry out interventions based on the plan of care established by the Registered Nurse, making changes based on client condition, and evaluate the success of the nursing intervention.
5. Safeguard the client's and the family's rights to dignity and privacy while adhering to mandatory reporting of suspected abuse.
6. Utilize critical thinking to provide effective nursing care for individuals and /or groups throughout the developmental stages over the life span.
7. Provide safe and effective care to clients by: (a) utilizing knowledge of normal values to identify deviations in health status; (b) utilizing the nursing process; (c) utilizing evidence based practice; (d) collaborating with health care team members to coordinate delivery of nursing care.
8. Administer medications following the six (6) drug rights and monitor clients receiving parenteral therapies.
9. Provide health teaching for individuals, families and /or groups that are developmentally appropriate for health promotion and disease prevention.
10. Act as patient advocate.

These identified program outcomes are clustered into outcome areas: Assessment, Critical Thinking, Planning, Implementation and Analysis/Evaluation.

Action: The re-aligned program outcomes were further defined by specific objectives in each module of the program. Program Outcome objectives build on the nursing knowledge and skills to be mastered in each module. Through focused interviews with theory and clinical faculty as well as quantitative evaluation of exam scores in Modules 1



and 2, the VN students demonstrate a need for additional support with the basic concepts of Anatomy and Physiology.

In July 2010 CBD College developed an Anatomy and Physiology course as a pre-requisite to entry into Module I of the VN program. This was implemented with the class that started in November 2010. Currently this group has demonstrated an increase in understanding of the process of head-to-toe assessment and focused assessment based on body systems. This is evidenced by quantitative review of current exam scores for Module I and comparison of the scores from the prior Module I group, as well as observations from the skills lab and clinical instructors.

3. Components of VN Program: Theory and Clinical objectives were reviewed and analyzed for their congruency to the program outcomes. Lesson plans were reviewed and analyzed for effective implementation of program outcome objectives. The VN theory and clinical objectives are the same for both the traditional and Applied Associate of Science VN programs.

Action: The Ad Hoc committee reviewed the current CBD College Library List and with input from faculty and student and the support of CBD leadership an online student resource library was identified and fully implemented October 2010. The online student resource library augments the nursing texts used and allows for both theory and clinical instructors to develop assignments that address the most current clinical knowledge base and skills.

4. VN Program Operations: CBD College continues to enforce an attendance policy that ensures each student complete the number of theory, laboratory and clinical hours required by the BVNPT for licensure. The Ad Hoc committee reviewed and analyzed the Remediation Plan for VN students. The current plan requires the theory instructor to actively assess students for academic difficulty and provide prompt intervention. This remediation process has been in place since 2008.

Action: Based on data collected during student focus groups it was identified that student would welcome boarder access to academic support. Currently each instructor has office hours after each theory day. In order to increase access to academic support each instructor will clearly identify they academic support time as evidenced by announcement during class and posted schedule.

In addition to this, the faculty member specifically assigned to assist with the developing and implementing student tutoring will actively support the instructor as needed with student improvement plan development and direct student assistance. Both of these interventions were implemented June 2010.

5. VN Program Evaluation Process: CBD College routinely reviews the effectiveness of clinical and theory faculty, the classroom and clinical environments and the progress of the VN students. Each faculty member is observed in their instructional environment by the Program Director with every new module start (every fifteen (15) weeks). Faculty



members are issued copies of the instructional plan upon their hire and are expected to be comfortable with both theory and clinical requirements.

With every new module start, each current clinical site is reviewed by the Program Director and the faculty assigned to that site. This review ensures that the clinical objectives of the program curriculum continue to be congruent with the experiences available at the clinical site.

Evaluating the progress of the VN students is done testing: unit and module exams, computerized knowledge assessment: ATI, NCLEX review assessment testing. CBD implemented ATI in 2008 and has utilized it as an assessment of student progress throughout the VN program.

Action: Based on data collected from focused interviews with clinical faculty and clinical agency staff it was demonstrated that the great majority of CBD clinical partners are active stakeholders in the training and education of the VN students. Collaboration between faculty and staff to develop a student clinical assessment process is currently being piloted at the Pediatric clinical site: Orthopedic Hospital Pediatric Urgent Care. Collaborative assessment processes are currently being developed for CBD College's OB/GYN rotation, Acute Medical/Surgical rotations and Long-term care clinical experiences.

Data collected by student focus groups and theory faculty focused interviews it was identified that the students found ATI helpful but did not feel that got enough exposure to the ATI testing process. Faculty currently incorporates ATI into their lecture structure as a supportive resource. Beginning with the new module start, the Ad Hoc committee will be working with ATI representatives to perform a curriculum alignment in order to fully integrate ATI resources into the VN program curriculum. Upon completion of this intervention, CBD College will submit the requested changes to the BVNPT board of approval.

Outcomes/Recommendations:

The program review process demonstrated that the VN program is in need of a structured program logic model that will allow for clear and logically consistent method of monitoring and maintaining successful program outcomes. In addition to the interventions mentioned in this report, CBD College has started the development of our program logic model that will focus on the following outcomes:

- CBD College will achieve an NCLEX annual passing rate of 60% by May 2012.
- Develop systems and processes to increase and maintain the NCLEX passing rate at a range of 75-90%.
- Develop a program surveillance process focused on prompt identification of changes in program activity and rapid corrective action: decrease in quarterly NCLEX pass rates, changing trends in ATI pass rates, changes in NCLEX workshop assessment exam rates.

CURRENT
STUDENT
ENROLLMENT

Please complete the following Enrollment Data Table for all classes currently enrolled and for those that are proposed.

School Name: Community Based Education and Development.

ENROLLMENT DATA			
CLASS DATES		#Students Admitted at time of class start	Total Enrollment: #Students who are still in the class
Date class started or will start	Date class will Complete		
11/30/2009	03/27/2011	40	39
04/05/2010	07/24/2011	40	35
11/29/2010	03/26/2012	15	15
10/05/2009	03/04/2011 (1)	9	7

1. AAS Class-approved as a different start.

Signature: _____ **Date:** _____

ENROLLMENT DATA				
CLASS DATES		#Students Admitted at time of class start	#Students who are still in class	Total Enrollment
Date class started or will start	Date class will Complete			
11/30/2009	03/27/2011	40	39	39
04/05/2010	07/24/2011	40	35	35+39=74
11/29/2010	03/26/2012	15	15	15+74=89
10/05/2009	03/04/2011 (1)	9	7	7+89=96

Signature: _____ Date: _____

2. AAS Class-approved as a different start.

Community Based Education and Development- Student Population Demographics

Class Start Date	Projected Graduation Date	African-American	Asian/Pacific Islander	Caucasian	Hispanic	Native American	Other
11/30/09	03/27/11	7		31	2		
04/05/10	07/24/11	7		14	5		
08/03/09	11/21/10	5		27	5		
10/05/09 (AASVN Class)	03/04/11	1		8			
11/30/09	03/27/11	7		31	2		
04/05/10	07/24/11	7		14	5		
11/29/2010	03/26/2012	3		8	4		

submit additional page if necessary.

I hereby certify under penalty of perjury under the laws of the State of California that the information contained in this Annual Report is true and

ADMISSION CRITERIA

October 8, 2010

Cheryl C. Anderson, M.S., R.N.
Supervising Nursing Education Consultant
Board of Vocational Nursing and Psychiatric Technicians
2535 Capitol Oaks Drive, Suite 205
Sacramento, California 95833

Re: Annual Report

Dear Ms. Anderson,

Please find enclosed our 2009-2010 annual report. Summarized below are minor changes we have made to the VN program during this reporting period.

Career Mobility: We have developed a CNA to LVN track that provides the theory and practical background for our students to successfully achieve CNA certification upon completion of Module I.

Admissions, Screening and Selection Process: The minimum score requirement has been raised for the CPAT from: Reading-43, Language usage- 42 and Numerical Skills- 41 to scores of 50 and above in all the areas of assessment.

Assessment Tests: The use of HESI as our assessment test was discontinued in 2009. ATI is currently used in all modules as a tool to monitor students' progress.

Thank you for the opportunity to share our progress with you. Should you need any additional information or clarification of any points made in this document, please feel free to contact me at (323) 937-7772.

Sincerely,



Alice L. Sorrell-Thompson, MBA, RN
Director, Vocational Nursing Program
CBD College

ADMISSIONS

Requirements

To be admitted to CBD's Vocational Nursing Program, the applicant must:

- Be at least 17 years of age
- Have earned a high school diploma or its equivalent¹
- Present copies of personal documents (ID, Social Security Card and proof of legal residency in the country)
- Go through a background check
- Have an interview with an Admissions Representative
- Pass the ACT's CPAAt Career Programs Assessment Test
- Attend the orientation sessions designated for the program

Procedures

Each applicant must complete an Admissions Application. The application must be accompanied by a copy of the applicant's personal documents and a copy of his/her high school diploma. Upon its submission, a personal interview with an Admissions Representative will be scheduled, and the applicant will be notified regarding the admissions exam (ACT's CPAAt) date.

The minimum pass scores for the ACT's CPAAt test are shown of the following table:

PROGRAM	CPAAt ACT SCORE
<u>VOCATIONAL NURSING</u>	Language Usage ATB Min. Score 50
<u>AAS IN VOCATIONAL NURSING</u>	Reading ATB Min. Score 50 Numerical Skills ATB Min. Score 50

Note: CBD College does not enroll students under the ability-to-benefit criteria.

The school reserves the right to reject applicants based on failure to present any of the documents required or failure to comply with any applicable local, state or federal laws, statutes or regulations.

¹ The copy of the high school diploma may be replaced by an official high school transcript or GED certification. Foreign high school diploma may be accepted upon evaluation that certifies equivalency to US education.

SCREENING
AND
SELECTION
CRITERIA

ADMISSIONS

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The minimum pass scores for the ACT's CPAt test are shown of the following table:

PROGRAM	CPAt ACT SCORE
<u>VOCATIONAL NURSING</u>	Language Usage ATB Min. Score 50
<u>AAS IN VOCATIONAL NURSING</u>	Reading ATB Min. Score 50 Numerical Skills ATB Min. Score 50

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TERMINAL OBJECTIVES

Community Based Education and Development

VN Program Outcomes

Assessment

Outcome 1: Assess basic physical, emotional, spiritual and cultural needs of the client utilizing head to-toe and focused assessments.

Outcome 2: Collect data from available resources, including client, family, health care records, health care team members, established protocols, guidelines and document findings accurately and concisely.

	Module I	Module II	Module III	Module IV
	<ul style="list-style-type: none"> *Able to make accurate assessments at a beginning level utilizing learned data collection methods. *Differentiate normal from abnormal data and reports to clinical instructor in a timely manner. *Able to choose a preliminary nursing diagnosis from the NANDA list, based on assessment data. * With supervision, accurately documents assessment and care provided. 	<ul style="list-style-type: none"> *Able to demonstrate competency in performing as assessment on a middle-aged and elderly client. *Identifies and interprets abnormal clinical findings. *Demonstrates ability to complete a plan of care with the appropriate NANDA diagnosis based on assessment findings. *Reports all abnormal findings to clinical instructor and clinical staff involved in client care. 	<ul style="list-style-type: none"> *Able to identify cues and clues related to a suspected problem by utilizing baseline information *Correlate presented signs and symptoms with the laboratory test and diagnostic test results. *Able to demonstrate the ability to perform comprehensive history taking essential to the suspected diagnosis, which includes: personal, medical and family histories. *Demonstrates ability to perform head to toe assessment. 	<ul style="list-style-type: none"> *Able to demonstrate “mastery” of performing head-to-toe and focused assessment for adults in Medical/Surgical nursing care areas. *Able to demonstrate competency in performing assessments of Maternity and Pediatric clients. *Identifies and interprets abnormal clinical findings and appropriately intervenes with the support of the clinical instructor. *Able to demonstrate understanding of a NST tracing and identify common changes in fetal heart rates.

Critical Thinking

Outcome 5: Safeguard the client's and the family's rights to dignity and privacy while adhering to mandatory reporting of suspected abuse.

Outcome 6: Utilize critical thinking to provide effective nursing care for individuals and/or groups throughout the developmental stages over the life span.

	Module I	Module II	Module III	Module IV
	<ul style="list-style-type: none"> *Collects objective & subjective information needed for client care. *With guidance applies basic knowledge of nursing interventions to routine clinical care. *Able to explain rationales for nursing interventions. *Gathers, analyzes & interprets data appropriately. *Begins to distinguish relevant from irrelevant information, with guidance. *Organizes and clusters data with guidance. *Begins to differentiate between knowledge and opinion. *Begins to identify priorities of care based on Maslow's hierarchy of needs. 	<ul style="list-style-type: none"> *Applies theoretical knowledge to routine clinical practice. Applies appropriate rationales for nursing interventions. *Begins to interpret objective and subjective information to guide client care. *Begins to analyze complex data with guidance by instructor. *Recognizes standard patterns when clustering data. *Begins to distinguish levels of priority and possible alternatives. *Develops knowledge base and recognizes personal biases. *Implements Maslow's Hierarchy of Needs with client care. 	<ul style="list-style-type: none"> *Able to discuss and analyze anatomy and pathophysiology of the different systems and be able to correlate the presenting signs and symptoms. *Identify alteration and deviations from normal to abnormal bodily functions. *Analyze identified NANDA diagnosis with respect to client's privacy and rights with inclusion of the client's family in the plan of care. *Analyze the plan of care holistically, with emphasis on physical, psychological and spiritual effects of the disease process on the client. 	<ul style="list-style-type: none"> *Applies theoretical knowledge to specific areas of clinical practice: Medical/Surgical, Maternity and Pediatrics. Effectively utilizes appropriate rationales and nursing interventions. *Accurately interprets objective and subjective information to further develop client's plan of care. *Demonstrates ability to accurately assess Maternity and Pediatric clients. Analyze objective/subjective information and employ specific nursing interventions based on appropriate rationale. * Able to interpret and analyze complex data and accurately identify patterns of clustering data with minimal guidance from clinical instructor. * Able to effectively prioritize nursing care tasks with minimal supervision. * Incorporates Maslow's Hierarchy of needs into the planning and implementation of client's care.

Planning

Outcome 8: Administer medications following the six (6) drug rights and monitor clients receiving parenteral therapies.

Outcome 9: Provide health teaching for individuals, families and/or groups that are developmentally appropriate for health promotion and disease prevention.

	Module I	Module II	Module III	Module IV
	<ul style="list-style-type: none"> *With supervision administers medication safely and accurately following the “6 Rights” *Identifies a client’s immediate learning needs with assistance *Identifies common barriers to client learning. *Plans teaching strategies based on knowledge of growth and development; cultural awareness; and the teaching/learning process. *With guidance implements a simple, standardized teaching plan that is developmentally appropriate for health promotion and disease prevention. 	<ul style="list-style-type: none"> *Accurately administers medications by utilizing a standardized routine. *Able to assist client with meeting their healthcare needs. *Begins to develop an individualized plan of care to overcome client barriers. *Plans relevant and accurate interventions with validation for assigned clients. *Implements teaching plan to assist client with health promotion and disease prevention. *With supervision, evaluates the effectiveness of the teaching plan to maximize client adherence. 	<ul style="list-style-type: none"> *Able to identify goals of treatment to the problem, which includes: short term and long term goals. *Planning should be specific, measurable, attainable, holistic and time bounded. *Able to utilize medical interventions as a part of the plan with careful observation of its effects both adverse and side effects. *Safeguard patient’s rights in the plan of care. 	<ul style="list-style-type: none"> * Safely and accurately administers medication via all routes except IV. * Able to accurately calculate pediatric doses. *Able to accurately assess immediate and long-term learning needs of client and their support system. * Able to begin developing a family centered client teaching plan that is specific and individualized. * Develops and carries out individualized client care plans in specialized nursing areas that address actual and potential client barriers to learning.

Implementation

Outcome 3: Demonstrate effective communication skills with client's and team members in the practice of nursing.

Outcome 4: Prioritize and carry out interventions based on the plan of care established by the registered nurse, make changes based on client condition, and evaluate the success of nursing interventions.

Outcome 12: Act as patient advocate.

	Module I	Module II	Module III	Module IV
	<ul style="list-style-type: none"> *With guidance, begins to use therapeutic communication skills in interactions with clients & team members. *With guidance, recognizes one's own responsibility to maintain client confidentiality. *Begins to develop cultural competencies within the nursing process. * With guidance, prioritize and implement care based on client's plan of care. *Begins to perform selected nursing interventions under supervision of clinical instructor. *Describes the role of the nurse as advocate. *Recognize situations where client could participate in planning care. 	<ul style="list-style-type: none"> *Initiates therapeutic communication skills when interacting with client and members of the health care team. *Begins to view self as essential component of client care. *Begins to identify members of client care acceptable of sharing vital information to. *With guidance, implements age and culturally appropriate plan of care. *Performs selected nursing interventions using principles of caring with assistance of nursing instructor. *With minimal prompting states rationale for more individualized nursing interventions. *Begins to behave as client advocate in providing individualized care. 	<ul style="list-style-type: none"> *Implement nursing interventions suitable to the identified NANDA diagnosis. *Able to utilize the entire health care team in managing an identified diagnosis. *Able to include the client and their support system in the implementation of nursing planned actions. *Able to safely carry out identified nursing interventions related to NANDA diagnosis 	<ul style="list-style-type: none"> *Able to clearly define role as active participant in client's care. *Able to identify and assemble appropriate collaborators for client's continuity of care. *Able to develop client plan of care that is linguistically and culturally appropriate. *Demonstrates clear knowledge of rationale used to develop the individualized nursing interventions. *Consistently demonstrates the behaviors of a client advocate by providing individualized care in specialty areas.

Analysis/Evaluation

****Outcome 7:** Provide safe and effective care to clients by: (a) utilizing knowledge of normal values to identify deviations in health status; (b) utilizing the nursing process; (c) utilizing evidence based practice; (d) collaborating with health care team members to coordinate delivery of nursing care.

	Module I	Module II	Module III	Module IV
	<ul style="list-style-type: none"> *Recognize and verbalize short-term outcomes for assigned clients. *Uses standard precautions in all care performed. *With supervision, identifies and uses precautions needed for specific organisms. *With guidance maintains a safe work environment for self and others. *Identifies agency policies and procedures for student role in emergency situations. *Uses outcome criteria to evaluate client responses and effectiveness of care for common nursing interventions. 	<ul style="list-style-type: none"> *Identifies appropriate short term outcomes based on an individualized plan of care. *Recognizes and demonstrates understanding of contact precautions. *Begins to utilize appropriate research articles to validate nursing practice. *Able to adhere to the nursing process to guide client care. *Abides by agency policies when providing nursing care to assigned client. *Demonstrates beginning ability to prioritize nursing diagnoses with clear rationale for priority. *Begins to interrelate pathophysiology for relevant medical diagnoses when evaluating data. 	<ul style="list-style-type: none"> Be able to achieve short term and long term goals based on identified NANDA diagnosis. Be able to identify other measures that will further improve the plan of care for the assigned patient. Able to determine the success/failure of planned goals based on the evaluation process. 	<ul style="list-style-type: none"> *Analyzes assessment data and identifies short and long-term outcomes. *Develops appropriate interventions and evaluates their effectiveness by comparing expected and actual outcomes. *Actively utilizing nursing journals and participates in professional development activities to enhance nursing practice. *Consistently applies the nursing process in planning and delivering client care. *Seeks out agency policy on nursing care tasks. *Able to independently prioritize nursing diagnosis with appropriate rationale.

CURRICULUM OBJECTIVES



VOCATIONAL NURSING PROGRAM

CURRICULUM OBJECTIVES

Module I

Upon successful completion of the first of four Modules of the CBD College Vocational Nursing Program the students will be able to:

- Demonstrate ability to perform head-to-toe physical assessment
- Apply the basic bedside patient care fundamental skills
- Differentiate between ethical and unethical conducts of a vocational nurse
- Acknowledge the diversity of the population and apply the care according to the culture
- Understand the importance of effective and therapeutic communication
- Develop effective patient education techniques
- Demonstrate knowledge of documentation techniques
- Indicate the knowledge of principles of Medication Administration
- Understand the concepts of critical thinking
- Understand the principles of nursing process for effective patient care
- Identify the factors involved in end-of-life care



Module II

Upon successful completion of the second of four Modules of the CBD College Vocational Nursing Program the students will be able to:

- Identify and apply the nursing process steps in Emergency/First Aid situations
- Understand the care plan of the patient with diseases on the integumentary, musculoskeletal, respiratory, cardiovascular, blood/lymphatic and immunological systems
- Apply care for the surgical patient and patients with cancer and HIV/AIDS
- Deliver nursing care with critical thinking, in an orderly, scientific manner, under the supervision of the RN
- Identify nutrition needs for patients with specific diseases on the integumentary, musculoskeletal, respiratory, cardiovascular, blood/lymphatic and immunological systems
- Identify the needs of elderly patients with specific diseases on the integumentary, musculoskeletal, respiratory, cardiovascular, blood/lymphatic and immunological systems

Module III

Upon successful completion of the third of four Modules of the CBD College Vocational Nursing Program the students will be able to:

- Understand the care plan of the patient with diseases on the neurological, sensory, gastrointestinal, urinary, endocrine, exocrine pancreatic, and reproductive system
- Deliver nursing care with critical thinking, in an orderly, scientific manner, under the supervision of the RN
- Identify nutrition needs for patients with diseases on the neurological, sensory, gastrointestinal, urinary, endocrine exocrine pancreatic, and reproductive system
- Identify the needs of elderly patients with diseases on the neurological, sensory, gastrointestinal, urinary, endocrine exocrine pancreatic, and reproductive system
- Indicate the ability to care for patients with communicable diseases



Module IV

Upon successful completion of the fourth of four Modules of the CBD College Vocational Nursing Program the students will be able to:

- Understand the basic concepts of mental health
- Deliver nursing care for a patient with psychiatric disorders
- Demonstrate ability to promote health promotion for a pregnant patient
- Understand the nursing process on labor and delivery
- Indicate the ability to care for a newborn and family with special needs
- Acknowledge the needs of patients undergoing growth and development
- Understand the care plan of a pediatric patient
- Demonstrate ability to promote health promotion for the infant, child and adolescent patient
- Identify diverse leadership styles utilized by a nurse
- Understand the functions of the State Board
- Understand the role of a nurse supervisor
- Recognize the philosophy and relevant factors of rehabilitation nursing

INSTRUCTIONAL PLAN

COURSE SYLLABUS OUTLINE

Program: Vocational Nursing

Course Title: Introduction to Human Anatomy and Physiology

Instructor: Victor Chaban, PhD, MSCR

Course Description: This course offers a comprehensive study of *Human Anatomy and Physiology*. This course includes overview of structure and functions of all body systems, organs, tissues and cells with focus on major biochemical, molecular and cellular theories. The course focuses on the function of the integumentary, skeletal, muscular, respiratory, cardio-vascular, immune systems, as well as endocrine, nervous, urinary, digestive and reproductive systems. There is no laboratory requirement in this course but instruction material involves using microscopic anatomy slides, computerized models and other practical applications of the material presented in lecture.

Course Objectives: Upon completion of this course, students should be able to:

- Identify major functions associated with each system in the body.
- Outline principle physiological events occurring within each system.
- Integrate the different systems and describe how each plays a role in the body as a whole.
- Compare and contrast functional differences found in health and disease.
- Apply critical thinking skills in various clinically-related situations.

Clock/Credit Hours: 30 hrs. – 2.5 module credit units

Prerequisites Required: Admission to the Vocational Nursing Program

Instructional Resources: Textbook: *Structure and Function of the Body*, Thibodeau and Patton, 13th Edition, Elsevier, 2008.

Methods of Instruction: Lecture; Discussion; Reading; Study Guide; Audiovisual Aids; Demonstration

Method of Evaluation: Theory: Average of tests given throughout the course

Grading System: Instructors record theory grades for each student using 100 Percent Grading Scale, with 80% required to pass

Attendance Policy: Minimum attendance required of 80% of total course hours.

Course Outline

Week/Date	Topic	Chapter	Assignment
Week 1 01-06-11	<ul style="list-style-type: none"> • Introduction to the Structure of the human body • Organ Systems • Body Cavities 	Thibodeau Ch. 1 & 4	
Week 2 01-13-11	<ul style="list-style-type: none"> • Integumentary System • Body Membranes 	Thibodeau Ch. 5	Test #1
Week 3 01-20-11	<ul style="list-style-type: none"> • Skeletal System • Muscular System 	Thibodeau Ch. 6 & 7	
Week 4 01-27-11	<ul style="list-style-type: none"> • Nervous System • Special Senses 	Thibodeau Ch. 8&9	Test # 2
Week 5 02-03-11	<ul style="list-style-type: none"> • Endocrine System 	Thibodeau Ch. 10	
Week 6 02-10-11	<ul style="list-style-type: none"> • Cardiovascular System 	Thibodeau Ch. 11&12	Test #3
Week 7 02-17-11	<ul style="list-style-type: none"> • Lymphatic System • Immune System 	Thibodeau Ch. 13	
Week 8 03-03-11	<ul style="list-style-type: none"> • Gastrointestinal System 	Thibodeau Ch. 15	Test # 4
Week 9 03-10-11	<ul style="list-style-type: none"> • Urinary System 	Thibodeau Ch. 17	
Week 10 03-17-11	<ul style="list-style-type: none"> • Reproductive System 	Thibodeau Ch. 20	Test#5

THEORY
AND
CLINICAL
OBJECTIVES

COURSE SYLLABUS OUTLINE

Program: Vocational Nursing – Associate of Applied Sciences

Course Title/Number: Psychology 101 – Introduction to Psychology

Instructor: _____

Course Description: This course is a general introduction to psychology and includes an overview of the field of psychology and an understanding of human behavior. Students are introduced to the research methods used to advance the science of psychology and the various areas that comprise this discipline. Research and theories are presented, discussed and evaluated. Topics covered include biological psychology, sensation and perception, lifespan development, learning, memory, motivation and emotion, cognition and personality.

Course Objectives: Upon completion of this course, students should be able to:

- Define the term psychology and demonstrate command of the basic terminology, concepts, and principles of the discipline;
- Understand the goals of psychology and the application of scientific methods to reach those goals;
- Effectively analyze human behavior and its relationship with psychology;
- Provide input into one's own personality and personal relationships by thinking critically about psychological theories and principles;
- Discuss the ways that psychological theories are used to assess, predict, or change human behavior and how psychology is applied to influence and improve the lives of human beings.

Clock/Credit Hours: 45 hrs. – 4.5 quarter credit units

Prerequisites Required: Admission to the Nursing Program

Instructional Resources: Textbook: Introduction to Psychology: *James W. Kalat*, 8th Edition, Thomson Wadsworth, 2008

Methods of Instruction: Lecture, Discussion; Reading; Transparencies; Study Guide, Audiovisual Aids; Demonstration

Method of Evaluation: Average of Weekly Tests and Final Test

COURSE SYLLABUS OUTLINE

Program: Vocational Nursing

Course Title/Number: Nursing 100 – Foundations of Nursing

Instructor: Marilyn Peters, R.N., MN, MPH, CHES

Course Description: Fundamental principles underlying nursing care are presented. Focus is upon providing care to middle adult and geriatric clients. The concepts of critical thinking, caring and professional behaviors are introduced. Content related to communication, human relationships, health promotion, maintenance, and restoration, medical asepsis, use of the nursing process and medication administration is presented. Upon completion of this course and Nursing 110, students are eligible to sit for the Certified Nursing Assistant Examination.

Course Objectives: Upon completion of this course, students should be able to:

- Explain the components of the nursing process
- Demonstrate an understanding of the fundamental legal and ethical concepts related to nursing practice
- Demonstrate understanding of the stages of growth and development across the lifespan
- Explain the roles of the nurse in the delivery of health care

Clock/Credit Hours: 150 hrs. – 15 quarter credit units

Prerequisites Required: Admission to the Nursing Program

Instructional Resources:

Textbook: *Christensen & Kockrow, Foundations & Adult Health Nursing*, 6th Edition, Mosby Elsevier, 2011.

Textbook: *deWitt, Fundamental Concepts and Skills for Nursing*, 3rd Edition, Saunders Elsevier, 2009.

Textbook: *Morris, Calculate with Confidence*, 4th Edition, Mosby-Elsevier, 2006.

Methods of Instruction: Lecture; Discussion; Reading; Power Point Slides
Transparencies; Study Guide; Audiovisual Aids; Demonstration

Method of Evaluation: Weekly Tests/quizzes and Module Test.
Average of Weekly Tests – 50%
Module Test – 50%

Grading System: Instructors record theory grades for each student using 100 Percent Grading Scale, as follows:

4.0	90 -100% =	A =	Excellent
3.0	85 - 89% =	B =	Good
2.0	80 - 84% =	C =	Satisfactory
1.0	70 - 79% =	D =	Unsatisfactory
	0 - 69% =	F =	Fail

Attendance Policy: According to the Board of Vocational Nursing and Psychiatric Technicians (BVNPT), each student must complete ALL course hours in order to graduate and be recommended to the BVNPT for licensure. In case of absences (that cannot exceed 20% of total course hours), students have to be make up those hours within 2 weeks, or before the end of the Module (whichever occurs first).

Completion Requirements: Minimum average of 80% and compliance of attendance policy (not missing more than 20% of total course hours and making up all missed hours)

Course Timeframe: 30 meetings (15 weeks)

Start date:

End date:

Hrs: 08:30 - 15:00

COURSE SYLLABUS OUTLINE

Program: Vocational Nursing

Course Title/Number: Nursing 101 – Basic Clinical Concepts I

Instructor: Stephanie Jackson, RN., MSN., CNS

Course Description: The focus of this course is to teach students how to providing care to adult patients experiencing normal life processes or common/chronic disease processes in selected body systems. The course is a continuation of principles of nursing care introduced in Nursing 100. This course includes the following clock hours towards eligibility for referral to the California BVNPT for licensure: Medical/Surgical 52.

Course Objectives: Upon completion of this course, students should be able to:

- Discuss nursing care based on scientific and technical principles and nursing systems
- Discuss the anatomy and physiology, etiology and clinical manifestations of disease processes affecting the: Respiratory, Cardiovascular, Musculoskeletal, Integumentary, Blood/Lymph and Immune systems of the human body.
- Apply the steps of the nursing process and critical thinking in the care of patients
- Explain the importance of nutrition and diet therapy in the health of the patient
- Identify the drugs used to treat diseases of the studied body systems
- Explain the differences in providing care of adults with diseases of the body system and older adults with the same diseases

Clock/Credit Hours: 150 hrs. – 15 quarter credit units

Prerequisites Required: Nursing 100, Nursing 110

Co requisites Required: Nursing 111

Instructional Resources:

Textbook: *Christensen & Kockrow, Foundations & Adult Health Nursing*, 5th Edition, Elsevier, 2006

Textbook: *Asperheim, Introduction to Pharmacology*, 11th Edition, Elsevier, 2009

Methods of Instruction: Lecture; Discussion; Reading; Transparencies; Study Guide; Audiovisual Aids; Demonstration

Method of Evaluation: Weekly Tests/quizzes and Module Test.

Average of Weekly Tests – 50%

Module Test – 50%

Grading System: Instructors record theory grades for each student using 100 Percent Grading Scale, as follows:

4.0	90 -100% =	A =	Excellent
3.0	85 - 89% =	B =	Good
2.0	80 - 84% =	C =	Satisfactory
1.0	70 - 79% =	D =	Unsatisfactory
	0 - 69% =	F =	Fail

Attendance Policy: According to the Board of Vocational Nursing and Psychiatric Technicians (BVNPT), each student must complete ALL course hours in order to graduate and be recommended to the BVNPT for licensure. In case of absences (that cannot exceed 20% of total course hours), students have to be make up those hours within 2 weeks, or before the end of the Module (whichever occurs first).

Completion Requirements: Minimum average of 80% and compliance of attendance policy (not missing more than 20% of total course hours and making up all missed hours)

Course Timeframe: 30 meetings (15 weeks)

Start date:

End date:

Hrs: 08:30 - 15:00

COURSE SYLLABUS OUTLINE

Program: Vocational Nursing

Course Title/Number: Nursing 102 – Basic Clinical Concepts II

Instructor: Sheryl Antido, RN, BSN,

Course Description: A continuation of Nursing 101 with the focus on providing care to adult patients experiencing normal life processes or common/chronic disease processes in selected body systems. This course includes the following clock hours towards eligibility for referral to the California BVNPT for licensure: Medical/Surgical 60.

Course Objectives: Upon completion of this course, students should be able to:

- Discuss nursing care based on scientific and technical principles and nursing systems
- Discuss the anatomy and physiology, etiology and clinical manifestations of disease processes affecting the: Neurological, Sensory, Gastrointestinal, Biliary, Urinary, Endocrine and Reproductive systems of the human body.
- Apply the steps of the nursing process and critical thinking in the care of patients
- Explain the importance of nutrition and diet therapy in the health of the patient
- Identify the drugs used to treat diseases of the studied body systems
- Explain the differences in providing care of adults with diseases of the body system and older adults with the same diseases

Clock/Credit Hours: 150 hrs. – 15 quarter credit units

Prerequisites Required: Nursing 101, Nursing 111

Co requisites Required: Nursing 112

Instructional Resources:

Textbook: *Christensen & Kockrow, Foundations & Adult Health Nursing*, 5th Edition, Elsevier, 2006

Textbook: *Asperheim, Introduction to Pharmacology*, 11th Edition, Elsevier, 2009

Methods of Instruction: Lecture; Discussion; Reading; Transparencies; Study Guide; Audiovisual Aids; Demonstration

Method of Evaluation: Weekly Tests/quizzes and Module Test.

Average of Weekly Tests – 50%

Module Test – 50%

Grading System: Instructors record theory grades for each student using **100** Percent Grading Scale, as follows:

4.0 90 -100% = A = Excellent

Attendance Policy: According to the Board of Vocational Nursing and Psychiatric Technicians (BVNPT), each student must complete ALL course hours in order to graduate and be recommended to the BVNPT for licensure. In case of absences (that cannot exceed 20% of total course hours), students have to be make up those hours within 2 weeks, or before the end of the Module (whichever occurs first).

Completion Requirements: Minimum average of 80% and compliance of attendance policy (not missing more than 20% of total course hours and making up all missed hours)

Course Timeframe: 30 meetings

Start date:

End date:

Hrs: 08:30 - 15:00

COURSE SYLLABUS OUTLINE

Program: Vocational Nursing

Course Title/Number: Nursing 103 – Vocational Nursing

Instructor: Karen Kilpatrick, MSN, RN

Course Description: The focus of this course is on the Nursing Specialties, such as Mental Health, Pediatrics and Maternity, as well as on preparation to complete the NCLEX-PN and enter practice as a vocational nurse. This course introduces the student to leadership and management skills and provides information on employment and educational opportunities available to the practical nurse. Work skills such as procuring, retaining and terminating employment are discussed, as well as personal and professional liability insurance, application for state licensure, NCLEX application, professional organizational membership and continuing education. This course includes the following clock hours towards eligibility for referral to the California BVNPT for licensure: Maternal/Newborn 25; Pediatrics 25.

Course Objectives: Upon completion of this course, students should be able to:

- Discuss concepts of mental health
- Apply the steps of the nursing process and critical thinking in relation to the care of maternity and pediatric patients
- Identify leadership and supervision techniques utilized in the health care environment

Clock/Credit Hours: 150 hrs. – 15 quarter credit units

Prerequisites Required: Nursing 102, Nursing 112

Co requisites Required: Nursing 113

Instructional Resources:

Textbook & Study Guide: *Christensen & Kockrow, Foundations of Nursing and Adult Health Nursing*, 5th Edition, Elsevier, 2006

Textbook: *Asperheim, Introduction to Pharmacology*, 11th Edition, Elsevier, 2009

Methods of Instruction: Lecture; Discussion; Reading; Transparencies; Study Guide; Audiovisual Aids; Demonstration

Method of Evaluation: Weekly Tests/quizzes and Module Test.
Average of Weekly Tests – 50%

Module Test – 50%

Grading System: Instructors record theory grades for each student using **100** Percent Grading Scale, as follows:

4.0	90 -100% =	A =	Excellent
3.0	85 - 89% =	B =	Good
2.0	80 - 84% =	C =	Satisfactory
1.0	70 - 79% =	D =	Unsatisfactory
	0 - 69% =	F =	Fail

Attendance Policy: According to the Board of Vocational Nursing and Psychiatric Technicians (BVNPT), each student must complete ALL course hours in order to graduate and be recommended to the BVNPT for licensure. In case of absences (that cannot exceed 20% of total course hours), students have to be make up those hours within 2 weeks, or before the end of the Module (whichever occurs first).

Completion Requirements: Minimum average of 80% and compliance of attendance policy (not missing more than 20% of total course hours and making up all missed hours).

Course Timeframe: 30 meetings (15 weeks)

Start date:

End date:

Hrs: 08:30 - 15:00

Grading System: Instructors record theory grades for each student using **100 Percent Grading Scale**, as follows:

4.0	90 -100% =	A =	Excellent
3.0	80 - 89% =	B =	Good
2.0	75 - 79% =	C =	Satisfactory
1.0	67 - 74% =	D =	Unsatisfactory
	0 - 66% =	F =	Fail

Attendance Policy: Minimum attendance required of 80% of total course hours.

Completion Requirements: Minimum average of 75% and compliance of attendance policy (not missing more than 20% of total course hours).

Course Timeframe: 15 meetings

Start date: _____

End date: _____

Hrs: _____ - _____

COURSE SYLLABUS OUTLINE

Program: Vocational Nursing – Associate of Applied Sciences

Course Title/Number: Sociology 101 – Introduction to Sociology

Instructor: _____

Course Description: The course will provide a further understanding of human group behavior and the organization of society. Using several theoretical points of view, the student will study and analyze the organization of social life style, problems of inequality of age, sex, race and ethnicity, social class and life style, basic social institutions, global issues of technology, social movements and social change.

Course Objectives: Upon completion of this course, students should be able to:

- Understand the distinctive perspective of sociology.
- Recognize and apply several different sociological theories and concepts to social issues.
- Analyze the world with a critical sociological perspective and utilize sociological tools to envision solutions for social problems
- Recognize and critically evaluate your own personal values.
- Understand the ways in which race, class, gender, culture, political and economic systems affect individual lives, and how individuals and groups can affect societies.
- Think critically about social justice efforts and inequalities in communities and environments.

Clock/Credit Hours: 45 hrs. – 4.5 quarter credit units

Prerequisites Required: Admission to the Nursing Program

Instructional Resources: Textbook: Essentials of Sociology – A Down-to-Earth Approach; James M. Henslin, 7th Edition, Pearson, 2006

Methods of Instruction: Lecture, Discussion; Reading; Transparencies; Study Guide, Audiovisual Aids; Demonstration

Method of Evaluation: Average of all tests given through the course.

Grading System: Instructors record theory grades for each student using **100 Percent Grading Scale**, as follows:

4.0	90 -100% =	A =	Excellent
3.0	80 - 89% =	B =	Good
2.0	75 - 79% =	C =	Satisfactory
1.0	70 - 74% =	D =	Unsatisfactory
	0 - 69% =	F =	Fail

Attendance Policy: Minimum attendance required of 80% of total course hours

Completion Requirements: Minimum average of 75% and compliance of attendance policy (not missing more than 20% of total course).

Course Timeframe: 15 meetings

Start date: _____

End date: _____

Hrs: _____

COURSE SYLLABUS OUTLINE

Program: Vocational Nursing – Associate of Applied Sciences

Course Title/Number: Biology 102 – Human Anatomy

Instructor: _____

Course Description: This course emphasizes the principles of human anatomy and includes overview of all body systems, organs, tissues and cells with focus on major biochemical molecular and cellular biology theories. Topic dealing with the nature of science, human genetics and development are included. Lab exercises include observation of vertebrate dissections.

Course Objectives: Upon completion of this course, students should be able to:

- Understand the structure of the human body
- Appropriately use anatomical terminology when referring to the human body
- Identify major micro and macro anatomical structures associated with each system in the body;
- Compare and contrast structural differences found in health and disease;
- Apply critical thinking skills in various clinically-related situations.

Clock/Credit Hours: 90 hrs. – 6.5 quarter credit units

Prerequisites Required: Admission to the Nursing Program

Instructional Resources: Textbook: *Structure and Function of the Body*, Thibodeau and Patton, 13th Edition, Elsevier, 2008.

Methods of Instruction: Lecture; Discussion; Reading; Transparencies; Study Guide; Audiovisual Aids; Demonstration

Method of Evaluation: Theory: Average of tests given throughout the course.

Lab: Students are evaluated in the clinical areas using a “Pass”/”Fail” designation, based upon successful completion of the lab objectives.

Grading System: Instructors record theory grades for each student using 100 Percent Grading Scale, as follows:

4.0	90 -100% =	A =	Excellent
3.0	80 - 89% =	B =	Good
2.0	75 - 79% =	C =	Satisfactory
1.0	67 - 74% =	D =	Unsatisfactory
	0 - 66% =	F =	Fail

Attendance Policy: Minimum attendance required of 80% of total course hours.

Completion Requirements: Pass mark on lab objectives, minimum average of 75% and compliance of attendance policy (not missing more than 20% of total course hours).

Course Timeframe: 15 meetings

Start date: _____

End date: _____

Hrs: _____

COURSE SYLLABUS OUTLINE

Program: Vocational Nursing – Associate of Applied Sciences

Course Title/Number: Biology 103 – Human Physiology

Instructor: _____

Course Description: This course offers a comprehensive study of *Human Physiology*. This course includes overview of structure and functions of all body systems, organs, tissues and cells with focus on major biochemical, molecular and cellular theories. The course focuses on the function of the integumentary, skeletal, muscular, respiratory, cardio-vascular, immune systems, as well as endocrine, nervous, urinary, digestive and reproductive systems. The laboratory portion focuses on practical applications of the material presented in lecture

Course Objectives: Upon completion of this course, students should be able to:

- Identify major functions associated with each system in the body.
- Outline principle physiological events occurring within each system.
- Integrate the different systems and describe how each plays a role in the body as a whole.
- Compare and contrast functional differences found in health and disease.
- Apply critical thinking skills in various clinically-related situations.

Clock/Credit Hours: 90 hrs. – 6.5 quarter credit units

Prerequisites Required: Admission to the Nursing Program

Instructional Resources: Textbook: *Structure and Function of the Body*, Thibodeau and Patton, 13th Edition, Elsevier, 2008.

Methods of Instruction: Lecture; Discussion; Reading; Transparencies; Study Guide; Audiovisual Aids; Demonstration

Method of Evaluation: Theory: Average of tests given throughout the course.

Lab: Students are evaluated in the clinical areas using a “Pass”/”Fail” designation, based upon successful completion of the lab objectives.

Grading System: Instructors record theory grades for each student using 100 Percent Grading Scale, as follows:

4.0	90 -100% =	A =	Excellent
3.0	80 - 89% =	B =	Good
2.0	75 - 79% =	C =	Satisfactory
1.0	67 - 74% =	D =	Unsatisfactory
	0 - 66% =	F =	Fail

Attendance Policy: Minimum attendance required of 80% of total course hours.

Completion Requirements: Pass mark on lab objectives, plus minimum average of 75% and compliance of attendance policy (not missing more than 20% of total course hours).

Course Timeframe: 15 meetings

Start date: _____

End date: _____

Hrs: _____

COURSE SYLLABUS & OUTLINE

Program: Vocational Nursing – Associate of Applied Sciences

Course Title/Number: Chemistry 101 - Chemistry

Instructor: _____

Course Description: This course is designed to offer a comprehensive study of Chemistry, providing an overview of all aspects of modern chemistry. The students will be introduced to fundamental theories of inorganic chemistry, such as atomic structure, gas laws, and chemical calculations. The laboratory portion of the course correlated to the materials presented in lecture.

Course Objectives: Upon completion of this course, students should be able to:

- Understand the importance of the scientific method
- Perform chemical calculations
- Explain the atomic structures
- Compare the gases laws
- Analyze and explain chemical reactions

Clock/Credit Hours: 45 hrs. of lecture + 45 hrs. of lab.= 6.5 quarter credit units

Prerequisites Required: Admission to the Nursing Program

Instructional Resources: Textbook: An Introduction to General Chemistry, *Blei & Odian*, 2nd Edition, Freeman Company, 2006

Methods of Instruction: Lecture, Discussion; Reading; Transparencies; Study Guide, Audiovisual Aids; Demonstration

Method of Evaluation: Theory: Average of tests given throughout the course
Lab: Students are evaluated in the clinical areas using a “Pass”/“Fail” designation, based upon successful completion of the lab objectives.

Grading System for theory: Instructors record theory grades for each student using **100 Percent Grading Scale**, as follows:

4.0	90 -100% =	A =	Excellent
3.0	80 - 89% =	B =	Good
2.0	75 - 79% =	C =	Satisfactory
1.0	67 - 74% =	D =	Unsatisfactory
	0 - 74% =	F =	Fail

Attendance Policy: Minimum attendance required of 80% of total course hours.

Completion Requirements: Pass mark on lab objectives, plus minimum average of 75% and compliance of attendance policy (not missing more than 20% of total course)

Course Timeframe: 15 meetings

Start date: _____

End date: _____

Hrs: _____ - _____

Course Outline

Week/Date	Topic	Readings
1	INTRODUCTION <ul style="list-style-type: none"> • The language of Chemistry • The unit-conversion method • Element names and symbols 	Blei & Odian Ch. 1
2	TEMPERATURE & DENSITY / ATOMIC STRUCTURE <ul style="list-style-type: none"> • Density calculations • Temperature conversions • Atomic Mass • Periodic Table 	Blei & Odian Ch. 1 & 2
3	QM MODEL / MOLECULES AND CHEMICAL BONDS <ul style="list-style-type: none"> • QM Model • Ionic and covalent bonds • Octet rule and ion formation • Binary ionic compounds 	Blei & Odian Ch. 2 & 3
4	MOLECULES AND CHEMICAL BONDS (CONT'D) <ul style="list-style-type: none"> • Ionic compounds • Covalent compounds • Lewis structures 	Blei & Odian Ch. 3
5	MOLECULES (CONT'D) & CHEMICAL CALCULATIONS <ul style="list-style-type: none"> • Polar and non-polar bonds • VSEPR theory • Formula mass • Avogadro's number 	Blei & Odian Ch. 3 & 4
6	CHEMICAL CALCULATIONS (CONT'D) <ul style="list-style-type: none"> • Mole • Mole and gram conversion • Empirical formulas TEST # 1	Blei & Odian Ch. 4
7	CHEMICAL CALCULATIONS (CONT'D) & PROPERTIES OF GASES <ul style="list-style-type: none"> • Balance equations • Stoichiometric calcs. • Kinetic theory of gases 	Blei & Odian Ch. 4 & 5

COURSE SYLLABUS & OUTLINE

Program: Vocational Nursing – Associate of Applied Sciences

Course Title/Number: Biology 104 – Principles of Microbiology

Instructor: _____

Course Description: This course offers a comprehensive study of Microbiology under the health science perspective, providing an overview of all aspects of modern microbiology, enabling students to carry out their duties in an informed, safe and efficient manner. The course includes the study of the morphology, physiology, genetics, taxonomy, and ecology of microorganisms. Topics such as principles of immunology, control of microbes, and their relationship to disease are also included. The laboratory portion of the course focuses on practical applications of the material presented in lecture. Students will learn new techniques and will be exposed to a variety of experiments and observations.

Course Objectives: Upon completion of this course, students should be able to:

- Identify major microorganisms symbiotic or harmful for the human body
- Integrate the different microorganismal systems and describe how each plays a role in the body as a whole
- Compare and contrast structural differences found in health and disease
- Apply critical thinking in various clinically-related situations
- Appropriately use microbiological terminology when referring to the human body

Clock/Credit Hours: 45 hrs. of lecture + 45 hrs. of lab.= 6.5 quarter credit units

Prerequisites Required: Admission to the Nursing Program

Instructional Resources: Textbook: Burton's Microbiology for the Health Sciences, *Engelkirk & Burton*, 8th Edition, Lippincott Williams & Wilkins, 2006 and Instructor's Handouts

Methods of Instruction: Lecture, Discussion; Reading; Transparencies; Study Guide, Audiovisual Aids; Demonstration

Method of Evaluation: Theory: Average of tests given throughout the course
Lab: Students are evaluated in the clinical areas using a "Pass"/"Fail" designation, based upon successful completion of the lab objectives.

Grading System for theory: Instructors record theory grades for each student using 100 Percent Grading Scale, as follows:

4.0	90 -100% =	A =	Excellent
3.0	80 - 89% =	B =	Good
2.0	75 - 79% =	C =	Satisfactory
1.0	67 - 74% =	D =	Unsatisfactory
	0 - 66% =	F =	Fail

Attendance Policy: Minimum attendance required of 80% of total course hours.

Completion Requirements: Pass mark on lab objectives, plus minimum average of 75% and compliance of attendance policy (not missing more than 20% of total course)

Course Timeframe: 15 meetings

Start date: _____

End date: _____

Hrs: _____ - _____

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VOCATIONAL NURSING PROGRAM.

MODULE ONE: FOUNDATIONS OF NURSING

CLINICAL OBJECTIVES

AT THE END OF THE CLINICAL EXPERIENCE, THE STUDENT WILL BE ABLE TO:

	OBJECTIVES
1.	PROVIDE CARE FOR PATIENTS/RESIDENTS WITHIN THE SCOPE OF PRACTICE OF THE VOCATIONAL NURSING PROFESSIONAL.
2.	PROVIDE CARE FOR PATIENTS/RESIDENTS WITH A CARING ATTITUDE AND AN UNDERSTANDING OF THE PATIENTS/RESIDENTS CULTURAL BELIEFS AND PRACTICES.
3.	APPLY THE FOUR STEPS OF THE NURSING PROCESS WHICH INCLUDE ASSESSMENT, PLANNING, IMPLEMENTATION, AND EVALUATION IN A PATIENTS/RESIDENTS CARE SETTING
4.	DELIVER CARE TO PATIENTS/RESIDENTS IN COMPLIANCE WITH THE PROFESSIONAL STANDARDS OF NURSING PRACTICE AS WELL AS THE LEGAL AND ETHICAL GUIDELINES SET FORTH BY THE CALIFORNIA VN PRACTICE ACT.
5.	DEMONSTRATE UNDERSTANDING OF PT. CONFIDENTIALITY, BOTH VERBAL AND WRITTEN AND, ADHERE TO THE POLICIES OF THE CLINICAL SITE.
6.	DELIVER PATIENTS/RESIDENTS CARE KNOWING THE COMMON CHARACTERISTICS, CONCEPTS, AND PROCESSES RELATED TO TRANSMISSION OF COMMUNICABLE DISEASES INCLUDING ANY RISK FACTORS AND PREVENTIVE HEALTH PRACTICES.
7.	DELIVER SAFE PATIENTS/RESIDENTS CARE UTILIZING NURSING SKILLS COMPETENTLY, UNDER THE SUPERVISION OF THE CLINICAL INSTRUCTOR.
8.	ASSESS THE COMPREHENSIVE WELLNESS STATUS: BODY, MIND AND SPIRIT OF THE IDENTIFIED PATIENTS/RESIDENTS.

9.	DEMONSTRATE COMPETENT AND APPROPRIATE APPLICATION OF BODY MECHANICS TO ENSURE PATIENTS/RESIDENTS AND STUDENT SAFETY.
10.	DEMONSTRATE PROPER USE AND MONITORING OF PATIENTS/RESIDENTS PROTECTIVE DEVICES SUCH AS: MITTENS, WAIST RESTRAINS, ETC.
11.	PROVIDE END-OF-LIFE CARE ACCORDING WITH FACILITY PROTOCOL
12.	PROVIDE PROPER PATIENTS/RESIDENTS PRIVACY WHILE ASSISTING WITH PERSONAL CARE.
13.	ASSESS/DISCUSS PATIENTS/RESIDENTS NUTRITIONAL NEEDS. ASSIST WITH FEEDING.
14.	DEMONSTRATE AT ALL TIME PROPER HAND WASHING TECHNIQUE, UTILIZING STANDARD PRECAUTIONS, RULES OF ASEPSIS, AND STERILE PROCEDURES WHEN APPLICABLE.

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VOCATIONAL NURSING PROGRAM.

MODULE FOUR: VOCATIONAL NURSING

CLINICAL OBJECTIVES-PEDIATRIC NURSING

AT THE END OF THE CLINICAL EXPERIENCE, THE STUDENT WILL BE ABLE TO:

	OBJECTIVES
1.	PROVIDE CARE FOR PATIENTS/RESIDENTS WITHIN THE SCOPE OF PRACTICE OF THE VOCATIONAL NURSING PROFESSIONAL.
2.	PROVIDE CARE FOR PATIENTS/RESIDENTS WITH A CARING ATTITUDE AND AN UNDERSTANDING OF THE PATIENTS/RESIDENTS CULTURAL BELIEFS AND PRACTICES.
3.	APPLY THE FOUR STEPS OF THE NURSING PROCESS WHICH INCLUDE ASSESSMENT, PLANNING, IMPLEMENTATION, AND EVALUATION IN A PATIENTS/RESIDENTS CARE SETTING
4.	DELIVER CARE TO PATIENTS/RESIDENTS IN COMPLIANCE WITH THE PROFESSIONAL STANDARDS OF NURSING PRACTICE AS WELL AS THE LEGAL AND ETHICAL GUIDELINES SET FORTH BY THE CALIFORNIA VN PRACTICE ACT.
5.	DEMONSTRATE UNDERSTANDING OF PT. CONFIDENTIALITY, BOTH VERBAL AND WRITTEN AND, ADHERE TO THE POLICIES OF THE CLINICAL SITE.
6.	DELIVER PATIENTS/RESIDENTS CARE KNOWING THE COMMON CHARACTERISTICS, CONCEPTS, AND PROCESSES RELATED TO TRANSMISSION OF COMMUNICABLE DISEASES INCLUDING ANY RISK FACTORS AND PREVENTIVE HEALTH PRACTICES.
7.	DELIVER SAFE PATIENTS/RESIDENTS CARE UTILIZING NURSING SKILLS COMPETENTLY, UNDER THE SUPERVISION OF THE CLINICAL INSTRUCTOR.
8.	ASSESS THE COMPREHENSIVE WELLNESS STATUS: BODY, MIND AND SPIRIT OF THE IDENTIFIED PATIENTS/RESIDENTS.

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VOCATIONAL NURSING PROGRAM.

MODULE TWO: BASIC CLINICAL CONCEPTS OF NURSING

CLINICAL OBJECTIVES

AT THE END OF THE CLINICAL EXPERIENCE, THE STUDENT WILL BE ABLE TO:

	OBJECTIVES
1.	PROVIDE CARE FOR PATIENTS/RESIDENTS WITHIN THE SCOPE OF PRACTICE OF THE VOCATIONAL NURSING PROFESSIONAL.
2.	PROVIDE CARE FOR PATIENTS/RESIDENTS WITH A CARING ATTITUDE AND AN UNDERSTANDING OF THE PATIENTS/RESIDENTS CULTURAL BELIEFS AND PRACTICES.
3.	APPLY THE FOUR STEPS OF THE NURSING PROCESS WHICH INCLUDE ASSESSMENT, PLANNING, IMPLEMENTATION, AND EVALUATION IN A PATIENTS/RESIDENTS CARE SETTING
4.	DELIVER CARE TO PATIENTS/RESIDENTS IN COMPLIANCE WITH THE PROFESSIONAL STANDARDS OF NURSING PRACTICE AS WELL AS THE LEGAL AND ETHICAL GUIDELINES SET FORTH BY THE CALIFORNIA VN PRACTICE ACT.
5.	DEMONSTRATE UNDERSTANDING OF PT. CONFIDENTIALITY, BOTH VERBAL AND WRITTEN AND, ADHERE TO THE POLICIES OF THE CLINICAL SITE.
6.	DELIVER PATIENTS/RESIDENTS CARE KNOWING THE COMMON CHARACTERISTICS, CONCEPTS, AND PROCESSES RELATED TO TRANSMISSION OF COMMUNICABLE DISEASES INCLUDING ANY RISK FACTORS AND PREVENTIVE HEALTH PRACTICES.
7.	DELIVER SAFE PATIENTS/RESIDENTS CARE UTILIZING NURSING SKILLS COMPETENTLY, UNDER THE SUPERVISION OF THE CLINICAL INSTRUCTOR.
8.	ASSESS THE COMPREHENSIVE WELLNESS STATUS: BODY, MIND AND SPIRIT OF THE IDENTIFIED PATIENTS/RESIDENTS.

9.	DEMONSTRATE COMPETENT AND APPROPRIATE APPLICATION OF THE NURSING ASSESSMENT PROCESS FOR THE PATIENT PREPARING FOR SURGERY (PRE-OP), RETURNING FROM SURGERY (POST-OP), AS WELL AS THE PROPER ASSESSMENT AND CARE OF SURGICAL WOUNDS.
10.	DEMONSTRATE COMPETENT AND APPROPRIATE APPLICATION OF THE NURSING PROCESS IN PLANNING AND PROVIDING CARE TO THE PATIENT WITH CANCER.
11.	DEMONSTRATE COMPETENT AND APPROPRIATE APPLICATION OF THE NURSING PROCESS IN PLANNING AND PROVIDING CARE TO THE PATIENT WITH A MUSCULOSKELETAL DISORDER, SPECIFICALLY THE CARE OF PATIENT'S WITH HIP FRACTURES (S/P ORIF) AND RHEUMATOID AND OSTEOARTHRITIS.
12.	DEMONSTRATE COMPETENT AND APPROPRIATE APPLICATION OF THE NURSING PROCESS IN PLANNING AND PROVIDING CARE TO THE PATIENT WITH A RESPIRATORY DISORDER, SPECIFICALLY THE CARE OF PATIENT'S WITH COPD.
13.	DEMONSTRATE COMPETENT AND APPROPRIATE APPLICATION OF THE NURSING PROCESS IN PLANNING AND PROVIDING CARE TO THE PATIENT WITH A CARDIOVASCULAR DISORDER, SPECIFICALLY THE CARE OF PATIENT'S WITH HEART FAILURE, S/P MI, HYPERTENSION.
14.	DEMONSTRATE COMPETENT AND APPROPRIATE APPLICATION OF THE NURSING PROCESS IN PLANNING AND PROVIDING CARE TO THE PATIENT WITH A BLOOD/LYMPH DISORDER, SPECIFICALLY THE CARE OF PATIENT'S WITH: IRON DEFIECENCY ANEMIA.
15.	DEMONSTRATE COMPETENT AND APPROPRIATE APPLICATION OF THE NURSING PROCESS IN PLANNING AND PROVIDING CARE TO THE PATIENT WITH AN IMMUNE DISORDER/HIV AIDS. FOCUSING ON SPECIFIC FORMS OF PATIENT ISOLATION AND PPE USED IN THESE DISORDERS.

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MODULE THREE: BASIC CLINICAL CONCEPTS II OF NURSING

CLINICAL OBJECTIVES

AT THE END OF THE CLINICAL EXPERIENCE, THE STUDENT WILL BE ABLE TO:

	OBJECTIVES
1.	PROVIDE CARE FOR PATIENTS/RESIDENTS WITHIN THE SCOPE OF PRACTICE OF THE VOCATIONAL NURSING PROFESSIONAL.
2.	PROVIDE CARE FOR PATIENTS/RESIDENTS WITH A CARING ATTITUDE AND AN UNDERSTANDING OF THE PATIENTS/RESIDENTS CULTURAL BELIEFS AND PRACTICES.
3.	APPLY THE FOUR STEPS OF THE NURSING PROCESS WHICH INCLUDE ASSESSMENT, PLANNING, IMPLEMENTATION, AND EVALUATION IN A PATIENTS/RESIDENTS CARE SETTING
4.	DELIVER CARE TO PATIENTS/RESIDENTS IN COMPLIANCE WITH THE PROFESSIONAL STANDARDS OF NURSING PRACTICE AS WELL AS THE LEGAL AND ETHICAL GUIDELINES SET FORTH BY THE CALIFORNIA VN PRACTICE ACT.
5.	DEMONSTRATE UNDERSTANDING OF PT. CONFIDENTIALITY, BOTH VERBAL AND WRITTEN AND, ADHERE TO THE POLICIES OF THE CLINICAL SITE.
6.	DELIVER PATIENTS/RESIDENTS CARE KNOWING THE COMMON CHARACTERISTICS, CONCEPTS, AND PROCESSES RELATED TO TRANSMISSION OF COMMUNICABLE DISEASES INCLUDING ANY RISK FACTORS AND PREVENTIVE HEALTH PRACTICES.
7.	DELIVER SAFE PATIENTS/RESIDENTS CARE UTILIZING NURSING SKILLS COMPETENTLY, UNDER THE SUPERVISION OF THE CLINICAL INSTRUCTOR.
8.	ASSESS THE COMPREHENSIVE WELLNESS STATUS: BODY, MIND AND SPIRIT OF THE IDENTIFIED PATIENTS/RESIDENTS.

9.	DEMONSTRATE COMPETENT AND APPROPRIATE APPLICATION OF THE NURSING ASSESSMENT PROCESS FOR THE PATIENT WITH NEUROLOGICAL DISORDERS SPECIFICALLY PATIENT'S WITH DEGENERATIVE DISORDERS SUCH AS: MULTIPLE SCLOROSIS, ALZHEIMER'S DISEASE, AS WELL AS PATIENT'S THAT ARE S/P STROKE, AND THOSE HAVING SEIZURE DISORDERS.
10.	DEMONSTRATE COMPETENT AND APPROPRIATE APPLICATION OF THE NURSING PROCESS FOR THE PATIENT WITH VISUALL AND AUDITORY DISORDERS SUCH AS: GLAUCOMA, S/P CATARACT LENS REPLACEMENT SURGERY, COCHLEAR IMPLANT, AS WELL AS PATIENT'S WITH LIMITED VISUAL ACUITY AND HEARING LOSS.
11.	DEMONSTRATE COMPETENT AND APPROPRIATE APPLICATION OF THE NURSING PROCESS IN PLANNING AND PROVIDING CARE TO THE PATIENT WITH A GASTROINTESTINAL DISORDERS, SPECIFICALLY, PATIENT'S WITH ULCERS, DIVERTICULITIS, ULCERATIVE COLITIS.
12.	DEMONSTRATE COMPETENT AND APPROPRIATE APPLICATION OF THE NURSING PROCESS IN PLANNING AND PROVIDING CARE TO THE PATIENT WITH A DISORDER OF THE GALLBLADDER, LIVER OR BILIARY TRACT SPECIFICALLY PATIENT'S WITH HISTORIES OF CIRRHOSIS AND CHOLESYSTITIS.
13.	DEMONSTRATE COMPETENT AND APPROPRIATE APPLICATION OF THE NURSING PROCESS IN PLANNING AND PROVIDING CARE TO THE PATIENT WITH AN URINARY DISORDER SUCH AS: RECURRENT UTI'S, RENAL FAILURE, PATIENT'S UNDERGOING DIALYSIS.
14.	DEMONSTRATE COMPETENT AND APPROPRIATE APPLICATION OF THE NURSING PROCESS IN PLANNING AND PROVIDING CARE TO THE PATIENT WITH AN ENDOCRINE DISORDER SUCH AS: DIABETES MELLITUS, HYPOTHYROIDISM.
15.	DEMONSTRATE COMPETENT AND APPROPRIATE APPLICATION OF THE NURSING PROCESS IN PLANNING AND PROVIDING CARE TO THE PATIENT WITH A REPRODUCTIVE DISORDER SUCH AS MENOPAUSE.

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MODULE FOUR: VOCATIONAL NURSING.

CLINICAL OBJECTIVES-MEDICAL/SURGICAL NURSING

AT THE END OF THE CLINICAL EXPERIENCE, THE STUDENT WILL BE ABLE TO:

	OBJECTIVES
1.	PROVIDE CARE FOR PATIENTS/RESIDENTS WITHIN THE SCOPE OF PRACTICE OF THE VOCATIONAL NURSING PROFESSIONAL.
2.	PROVIDE CARE FOR PATIENTS/RESIDENTS WITH A CARING ATTITUDE AND AN UNDERSTANDING OF THE PATIENTS/RESIDENTS CULTURAL BELIEFS AND PRACTICES.
3.	APPLY THE FOUR STEPS OF THE NURSING PROCESS WHICH INCLUDE ASSESSMENT, PLANNING, IMPLEMENTATION, AND EVALUATION IN A PATIENTS/RESIDENTS CARE SETTING
4.	DELIVER CARE TO PATIENTS/RESIDENTS IN COMPLIANCE WITH THE PROFESSIONAL STANDARDS OF NURSING PRACTICE AS WELL AS THE LEGAL AND ETHICAL GUIDELINES SET FORTH BY THE CALIFORNIA VN PRACTICE ACT.
5.	DEMONSTRATE UNDERSTANDING OF PT. CONFIDENTIALITY, BOTH VERBAL AND WRITTEN AND, ADHERE TO THE POLICIES OF THE CLINICAL SITE.
6.	DELIVER PATIENTS/RESIDENTS CARE KNOWING THE COMMON CHARACTERISTICS, CONCEPTS, AND PROCESSES RELATED TO TRANSMISSION OF COMMUNICABLE DISEASES INCLUDING ANY RISK FACTORS AND PREVENTIVE HEALTH PRACTICES.
7.	DELIVER SAFE PATIENTS/RESIDENTS CARE UTILIZING NURSING SKILLS COMPETENTLY, UNDER THE SUPERVISION OF THE CLINICAL INSTRUCTOR.
8.	ASSESS THE COMPREHENSIVE WELLNESS STATUS: BODY, MIND AND SPIRIT OF THE IDENTIFIED PATIENTS/RESIDENTS.

9.	DEMONSTRATE COMPETENT AND APPROPRIATE APPLICATION OF THE NURSING ASSESSMENT PROCESS FOR THE PATIENT WITH A PSYCHIATRIC DISORDER.
10.	DEMONSTRATE THE ABILITY TO REVIEW THE NURSING PLAN OF CARE FOR A PATIENT WITH PSYCHIATRIC DISORDERS AND MAKE EFFECTIVE ADDITIONS BASED ON APPROPRIATE NURSING RATIONALE.
11.	DEMONSTRATE COMPETENCY AND CLEAR KNOWLEDGE OF THE SIX (6) MEDICATION RIGHTS IN THE PREPARATION AN ADMINISTRATION OF PSYCHITRIC MEDICATIONS.
12.	DEMONSTRATE COMPETENCY IN HEAD TO TOE PATIENT ASSESSMENT AND IS ABLE TO IDENTIFY SIGNIFICANT CHANGES IN PATIENT STATUS AND REPORT THOSE TO THE PHYSICIAN.
13.	DEMONSTRATE COMPETENT KNOWLEDGE OF THE VN SCOPE OF PRACTICE AND MAINTAINS ALL NURISNG ACTIONS AND INTERVENTIONS WITHIN THIS SCOPE.
14.	DEMONSTRATE COMPETENT AND APPROPRIATE APPLICATION OF THE NURSING PROCESS IN PLANNING AND PROVIDING CARE TO REHABILITATION PATIENT.
15.	DEMONSTRATE COMPETENCY IN CLINICAL TIME MANAGEMENT, APPROPRIATE DELEGATION AND SUPERVISION OF NURSING TASKS.

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MODULE FOUR: VOCATIONAL NURSING

CLINICAL OBJECTIVES-MATERNITY NURISNG

AT THE END OF THE CLINICAL EXPERIENCE, THE STUDENT WILL BE ABLE TO:

	OBJECTIVES
1.	PROVIDE CARE FOR PATIENTS/RESIDENTS WITHIN THE SCOPE OF PRACTICE OF THE VOCATIONAL NURSING PROFESSIONAL.
2.	PROVIDE CARE FOR PATIENTS/RESIDENTS WITH A CARING ATTITUDE AND AN UNDERSTANDING OF THE PATIENTS/RESIDENTS CULTURAL BELIEFS AND PRACTICES.
3.	APPLY THE FOUR STEPS OF THE NURSING PROCESS WHICH INCLUDE ASSESSMENT, PLANNING, IMPLEMENTATION, AND EVALUATION IN A PATIENTS/RESIDENTS CARE SETTING
4.	DELIVER CARE TO PATIENTS/RESIDENTS IN COMPLIANCE WITH THE PROFESSIONAL STANDARDS OF NURSING PRACTICE AS WELL AS THE LEGAL AND ETHICAL GUIDELINES SET FORTH BY THE CALIFORNIA VN PRACTICE ACT.
5.	DEMONSTRATE UNDERSTANDING OF PT. CONFIDENTIALITY, BOTH VERBAL AND WRITTEN AND, ADHERE TO THE POLICIES OF THE CLINICAL SITE.
6.	DELIVER PATIENTS/RESIDENTS CARE KNOWING THE COMMON CHARACTERISTICS, CONCEPTS, AND PROCESSES RELATED TO TRANSMISSION OF COMMUNICABLE DISEASES INCLUDING ANY RISK FACTORS AND PREVENTIVE HEALTH PRACTICES.
7.	DELIVER SAFE PATIENTS/RESIDENTS CARE UTILIZING NURSING SKILLS COMPETENTLY, UNDER THE SUPERVISION OF THE CLINICAL INSTRUCTOR.
8.	ASSESS THE COMPREHENSIVE WELLNESS STATUS: BODY, MIND AND SPIRIT OF THE IDENTIFIED PATIENTS/RESIDENTS.

9.	DEMONSTRATE COMPETENT AND APPROPRIATE APPLICATION OF THE NURSING ASSESSMENT OF THE PREGNANT PATIENT AND REPORT SIGNIFICANT CHANGES TO THE PHYSICIAN.
10.	DEMONSTRATE THE ABILITY TO REVIEW AND INTERPRET THE PRENATAL HISTORY OF A PREGNANT PATIENT AND APPROPRIATELY ADD TO THE NURSING CARE PLAN.
11.	DEMONSTRATE COMPETENCY AND CLEAR KNOWLEDGE OF THE SIX (6) MEDICATION RIGHTS IN THE PREPARATION AN ADMINISTRATION OF MEDICATIONS TO THE PRENATAL, PERINATAL AND POST-PARTUM PATIENT.
12.	DEMONSTRATES THE ABILITY TO ACTIVELY ASSIST THE NURSING STAFF IN SETTING UP AND PROVIDING PRENATAL, PERINATAL AND POSTPARTUM CARE.
13.	ACTIVELY OBSERVES THE PROCESS OF LABOR AND DELIVERY EITHER VAGINAL AND/OR C-SECTION.

9.	DEMONSTRATE COMPETENT AND APPROPRIATE APPLICATION OF THE NURSING ASSESSMENT OF THE PEDIATRIC PATIENT AND REPORT SIGNIFICANT CHANGES TO THE PHYSICIAN.
10.	DEMONSTRATE THE ABILITY TO REVIEW AND INTERPRET THE PRENATAL HISTORY OF A PEDIATRIC PATIENT AND APPROPRIATELY ADD TO THE NURSING CARE PLAN.
11.	DEMONSTRATE COMPETENCY AND CLEAR KNOWLEDGE OF THE SIX (6) MEDICATION RIGHTS IN THE PREPARATION AN ADMINISTRATION OF MEDICATIONS TO THE PEDIATRIC PATIENT.
12.	DEMONSTRATES THE ABILITY TO ACTIVELY ASSIST THE NURSING STAFF IN SETTING UP AND PROVIDING PEDIATRIC NURSING CARE.
13.	DEMONSTRATE COMPETENCY IN PERFORMING A HEAD-TO-TOE ASSESSMENT ON A PEDIATRIC PATIENT.

LESSON PLAN
FOR
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Module I: Week 3- Vital Signs and Physical Assessment

Objectives/Competency	Content	Method of Instruction
Vital Signs: <ol style="list-style-type: none"> 1. Define key terms related to vital signs. 2. Identify the vital signs. 3. Discuss the importance of accurately assessing vital signs. 4. Identify the guidelines for vital sign measurement. 5. List the various sites for pulse measurement 6. State the normal limits of each vital sign. 7. List the factors that affect vital sign reading. 8. Identify the rationale for each step of the vital signs procedures. 	0830-1015: Define key terms related to vital signs. Identify the vital signs. Discuss the importance of accurately assessing vital signs. Identify the guidelines for vital sign measurement. 1015-1030: Break 1030-1200: List the various sites for pulse measurement State the normal limits of each vital sign. List the factors that affect vital sign reading. Identify the rationale for each step of the vital signs procedures.	Lecture Discussion Reading Transparencies Study Guide Audiovisual Aids Demonstration
Physical Assessment: <ol style="list-style-type: none"> 1. Define the key terms related to physical assessment. 2. Discuss the difference between a sign and a symptom. 3. List the cardinal signs of inflammation and infection. 4. Describe the nursing responsibilities when assisting a physician with the physical examination. 5. List equipment and supplies necessary for the physical examination/assessment 6. Discuss the nurse-patient interview and data collection techniques. 7. List the basic essentials for a patient's health history. 8. Discuss the sequence of steps when performing a nursing assessment. 9. Discuss normal and abnormal assessment findings in the head-to-toe assessment. 	1200-1245: Lunch 1245-1345: Define the key terms related to physical assessment. Discuss the difference between a sign and a symptom. List the cardinal signs of inflammation and infection. Describe the nursing responsibilities when assisting a physician with the physical examination. List equipment and supplies necessary for the physical	<p style="text-align: center;">Training Aides & Handouts</p> Christensen-Kockrow (FON) Ch. 11 Pgs. 235-269 and Ch. 4 Pgs 53-80 Powerpoint presentation. Mosby clinical excursion
	1345-1400: Break 1400-1500: Discuss the nurse-patient interview and data collection techniques. List the basic essentials for a patient's health history. Discuss the sequence of steps when performing a nursing assessment. Discuss normal and abnormal assessment findings in the head-to-toe assessment.	<p style="text-align: center;">Evaluation Methods</p> Testing Case studies Return demonstration Group presentation Role-playing Instructor observation Critical thinking
		<p style="text-align: center;">Assignments</p> Study Guide: FON Ch. 4 and 11



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Module II: Week 10- Blood/Lymph system

Objectives/Competency	Content	Method of Instruction
Anatomy/Physiology: 1. Describe the components of blood. 2. Differentiate between the functions of erythrocytes, leukocytes, and thrombocytes. 3. Discuss the several factors necessary for the formation of erythrocytes. 4. Describe what the leukocyte differential means 5. Describe the blood clotting process 6. List the names of the basic blood groups. 7. Describe the generalized functions of the lymphatic system and list the primary lymphatic structures.	0830-1015: Describe the components of blood. Differentiate between the functions of erythrocytes, leukocytes, and thrombocytes. Discuss the several factors necessary for the formation of erythrocytes. Describe the blood clotting process 1015-1030: Break	Lecture Discussion Reading Transparencies Study Guide Audiovisual aids Demonstration
	1030-1200: List the names of the basic blood groups. Describe the generalized functions of the lymphatic system and list the primary lymphatic structures.	Training Aides & Handouts Christensen-Kockrow (FON) Ch. 7 (p 286-327) Powerpoint Presentation
Medical/Surgical Nursing: 1. Define the key terms related to blood. 2. List common diagnostic tests for evaluation of blood and lymph disorders of the hematological and lymphatic systems. 3. Define the key terms related to blood. 4. List common diagnostic tests for evaluation of blood and lymph disorders of the hematological and lymphatic systems. 5. List six signs and symptoms associated hypovolemic shock. 6. Discuss important aspects that should be presented in patient teaching and home care planning for the patient with pernicious anemia.	Define the key terms related to blood. List common diagnostic tests for evaluation of blood and lymph disorders of the hematological and lymphatic systems. 1200-1245: Lunch 1245-1345: List common diagnostic tests for evaluation of blood and lymph disorders of the hematological and lymphatic systems. List six signs and symptoms associated hypovolemic shock. 1345-1400: Break 1400-1500: Discuss important aspects that should be presented in patient teaching and home care planning for the patient with pernicious anemia.	Evaluation Methods Testing Case Study Return Demonstration Group Presentation Role playing Instructor observation Critical thinking
		Assignments Study guide FON Ch. 7 Blood/Lymph Disorders.



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<p>7. Discuss the etiology/pathophysiology, clinical manifestation assessment, diagnostic tests, medical management nursing interventions, patient teaching and prognosis for patients with acute and chronic leukemia, or multiple myeloma, malignant lymphoma and Hodgkin's disease.</p> <p>8. Discuss the potential complications of diagnostic tests, treatments procedures,</p>	<p>pernicious anemia. Discuss the etiology/pathophysiology, clinical manifestation assessment, diagnostic tests, medical management nursing interventions, patient teaching and prognosis for patients with acute and chronic leukemia, or multiple myeloma, malignant lymphoma and Hodgkin's disease. Discuss the potential complications of diagnostic tests, treatments procedures,</p>	
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<p>surgery or health alterations for the patient with a blood/lymph disorder.</p> <p>9. Discuss the unexpected response to therapy for the patient with a blood/lymph disorder.</p>		
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Module III: Week 3-Care of the patient with a Visual and Auditory Disorder.

Objectives/Competency	Content	Method of Instruction
<p><u>Anatomy/Physiology:</u> List the major sense organs and discuss their anatomical position. List the parts of the eye and define the function of each part List the three divisions of the ear, and discuss the function of each.</p> <p><u>Nursing theory:</u> Define key terms related to visual and auditory disorders. Describe two changes in the sensory system that occur as a result of the normal aging process. Describe inflammatory conditions of the lid, conjunctiva, cornea, cataracts, diabetic retinopathy, detachment, glaucoma, macular degeneration, corneal injuries, ear inflammatory and infectious disorders with etiology/pathophysiology, clinical manifestations, assessment, diagnostic tests, medical management, nursing interventions, patient teaching, and prognosis. Differentiate between conductive and sensorineural hearing loss List tips for communicating with hearing and sight impaired people Discuss the potential complications of diagnostic tests, treatments, procedures, surgery or health alterations for the patient with a visual or auditory disorder. Discuss therapeutic procedures for the patient with a visual or auditory disorder Discuss the unexpected response to therapy for the patient with a visual or auditory disorder.</p> <p><u>Pharmacology:</u> Discuss the drugs used to treat visual and auditory disorders.</p> <p><u>Gerontological Nursing:</u> Discuss the care of the older patient with visual and auditory disorders.</p> <p><u>Nutrition:</u> Discuss the recommended diet therapy for patients with visual and auditory disorders.</p>	<p>0830-1015: List the major sense organs and discuss their anatomical position. List the parts of the eye and define the function of each part List the three divisions of the ear, and discuss the function of each</p> <p>1015-1030: Break</p> <p>1030-1200: Describe two changes in the sensory system that occur as a result of the normal aging process. Describe inflammatory conditions of the lid, conjunctiva, cornea, cataracts, diabetic retinopathy, detachment, glaucoma, macular degeneration, corneal injuries, ear inflammatory and infectious disorders with etiology/pathophysiology, clinical manifestations, assessment, diagnostic tests, medical management, nursing interventions, patient teaching, and prognosis.</p> <p>1200-1245: Lunch</p> <p>1245-1345: Differentiate between conductive and sensorineural hearing loss List tips for communicating with hearing and sight impaired people Discuss the potential complications of diagnostic tests, treatments, procedures, surgery or health alterations for the patient with a visual or auditory disorder. Discuss therapeutic procedures for the patient with a visual or auditory disorder Discuss the unexpected response to therapy for the patient with a visual or auditory disorder</p> <p>1345-1400: Break</p> <p>1400-1500: Discuss the drugs used to treat visual and auditory disorders.</p>	<p>Lecture Discussion Reading Transparencies Study Guide Audiovisual Aids Demonstration</p> <hr/> <p style="text-align: center;">Training Aides & Handouts</p> <p>Christensen-Kockrow (FON) Ch. 13 Pgs. 634-684. Powerpoint presentation</p> <hr/> <p style="text-align: center;">Evaluation Methods</p> <p>Testing Case studies Return Demonstration Group Presentation Role-playing Instructor Observation Critical Thinking</p> <hr/> <p style="text-align: center;">Assignments</p> <p>Study Guide (FON) Ch. 13</p>



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<p>auditory disorders. <u>Critical Thinking:</u> Apply critical thinking to the treatment of a patient with visual and auditory disorders.</p>	<p>auditory disorders. Discuss the care of the older patient with visual and auditory disorders. Discuss the recommended diet therapy for patients with visual and auditory disorders. Apply critical thinking to the treatment of a patient with visual and auditory disorders.</p>	
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Module IV: Week-1 Basic Concepts of Mental Health

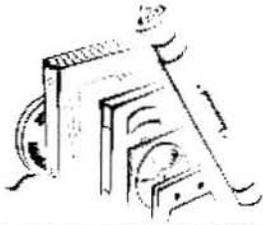
Objectives/Competency	Content	Method of Instruction
<ol style="list-style-type: none"> 1. Define the key terms related to mental health. 2. Discuss the mental health/illness concepts 3. Describe the mental health continuum 4. Identify defining characteristics of people who are mentally healthy and those who are mentally ill. 	<p><u>0830-1015:</u> Mental Health/Illness concepts Mental Health continuum</p> <p><u>1015-1030:</u> Break</p> <p><u>1030-1200:</u> Characteristics Personality Response to change</p>	<p>Lecture Discussion Audio/Visual aids</p>
<ol style="list-style-type: none"> 4. Identify defining characteristics of people who are mentally healthy and those who are mentally ill. 5. Define the parts of personality 6. Define the factors that influence an individual's response to change. 	<p><u>1200-1245:</u> Lunch</p> <p><u>1245-1345:</u> Emotional problems Stress and coping mechanisms Stress management</p>	<p style="text-align: center;">Training Aides & Handouts</p> <p>Study Guide: FON Chapter 34 pgs 279-289</p> <p>Power point notes pages</p>
<ol style="list-style-type: none"> 7. Identify factors that contribute to the development of emotional problems or mental illness. 8. Identify barriers to health adaptation. 9. Identify sources of stress and discuss coping mechanisms. 10. Explain how stress can be managed 11. Identify stages of illness behavior. 	<p><u>1400-1500:</u> Stages of illness behavior assessment Illness or crisis interventions Barriers to mental health</p>	<p style="text-align: center;">Evaluation Methods</p> <p>Role playing Critical thinking assessment Instructor observation Case studies Testing</p>
<ol style="list-style-type: none"> 12. Identify major components of a nursing assessment 		<p style="text-align: center;">Assignments</p> <p>Study guide FON- Ch. 34</p>



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<p>that focus on mental health status.</p> <p>13. Identify basic nursing interventions for those experiencing illness or crisis.</p>		<p>Foundations and Adult Health Nursing: Christensen, Kockrow. Chapter 34 pgs 1126-1138</p>
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Adult Health Nursing 4th ed.	Christensen, Barbara Lauritsen. / Kockrow, Elaine Oden.	610.73 Chr
Adult Health Nursing, STUDY GUIDE 4	Christensen, Barbara / Kockrow, Elaine	610 Chr
The American Heritage Abbreviations Dictionary : A Practical Compilation Of Today's Acronyms And Abbreviations. 2nd ed.	Houghton Mifflin Company.	423.1 Hou
The American Heritage Talking Dictionary [computer File]. 3rd ed.	SoftKey International Inc.	423 Sof
Anatomy And Physiology For English Language Learners	Penn, Judy Meier. / Hanson, Elizabeth, 1961-	428.6402461 Pen
The Anatomy And Physiology Learning System. 3rd ed.	Applegate, Edith J.	App
Apply Yourself : English For Job Search Success	Johnson, Lisa, 1960- / Levey, Lynn. / Chafcouloff, Elizabeth.	428.24 Joh
The Art Of Public Speaking 9th ed.	Lucas, Stephen, 1946-	808.51 Luc
Basic Adult Survival English : With Orientation To American Life	Walsh, Robert E., 1948-	428.24 Wal
Basic Adult Survival English : With Orientation To American Life	Walsh, Robert E., 1948-	428.24 Wal
Basic College Mathematics 3rd ed.	Martin-Gay, K. Elayn, 1955-	Mar
Basic English Grammar 3rd ed. with answer key	Azar, Betty Schramper, 1941-	428.24 Aza
Basic Geriatric Nursing 4th ed.	Wold, Gloria.	618.970231 Wol
Basic Mathematics 1st ed.	Prior, Robert H.	510 Pri
Basic Nursing : Essentials For Practice 6th ed.	Potter, Patricia Ann. / Perry, Anne Griffin.	610.73076 Pot
Basic Pharmacology For Nurses 14th ed.	Clayton, Bruce D., 1947- / Stock, Yvonne N. / Harroun, Renae D.	615.1 Cla
Basic Pharmacology For Nurses 14th ed.	Clayton, Bruce D., 1947- / Stock, Yvonne N. / Harroun, Renae D.	615.1 Cla
Basic Pharmacology For Nurses 13th ed.	Clayton, Bruce D., 1947- / Stock, Yvonne N.	615.1024613 Cla
Beginning Algebra (Beginning Algebra 5th Edition Supplemented With Multimedia Electronic Lecture Notes And ON-line Test) 5th Edition	Christensen, Barbara Lauritsen. / Kockrow, Elaine Oden.	Chr
Biology : Concepts & Connections 5th ed.	Campbell, Neil A., 1946-	Cam
Burton's Microbiology For The Health Sciences 8th ed.	Engelkirk, Paul G. / Burton, Gwendolyn R. W. (Gwendolyn R. Wilson). / Microbiology for the health sciences.	616.9041 Eng
Calculate With Confidence 4th ed.	Morris, Deborah Gray.	Mor
Career Strategies For The Working Woman	Scheele, Adele M.	650.14082 Sch

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CareerXroads : Career(cross)roads 5th ed.	Crispin, Gerry. / Mehler, Mark.	Cri
Caring For Older Adults Holistically 4th ed.	Anderson, Mary Ann, 1946-	618.970231 And
Client Management And Leadership Success : A Course Review Applying Critical Thinking Skills To Test Taking (Davis's Success) 1 Pap/Cdr	Hargrove-huttel, Ray / Colgrove, Kathryn Cadenhead	610 Har
Clinical Calculations : With Applications To General And Specialty Areas 6th ed.	Kee, Joyce LeFever. / Marshall, Sally M.	Kee
Clinical Companion For Ignatavicius-Workman Medical-surgical Nursing : Critical Thinking For Collaborative Care 5th ed.	Hausman, Kathy A. / Hausman, Kathy A. Clinical companion for / Medical-surgical nursing : critical thinking for	Hau
Clinical Microbiology Made Ridiculously Simple (MedMaster Series)	Gladwin, Mark. / Trattler, Bill.	616.01 Gla
Clinical Nursing Skills : Basic To Advanced Skills 6th ed.	Smith, Sandra Fucci. / Duell, Donna, 1938- / Martin, Barbara, M.S.	610.73 Smi
Communication : The Key To The Therapeutic Relationship	Schuster, Pamela McHugh, 1953-	610.730699 Sch
Communicator 1 : The Comprehensive Course In Functional English	Molinsky, Steven J. / Bliss, Bill.	428.24 Mol
Communicator II : The Comprehensive Course In Functional English	Molinsky, Steven J. / Bliss, Bill.	428.24 Mol
Complete Secretary's Handbook 7th ed.	De Vries, Mary Ann. / Doris, Lillian. Complete secretary's handbook.	651.3741 De
Concept Mapping : A Critical-thinking Approach To Care Planning 2nd ed.	Schuster, Pamela McHugh, 1953-	Sch
Contemporary's Put English To Work : Interaction And Competencies For Job Success. Level 1 1	Podnecky, Janet. / Contemporary Books, inc.	Pod.2402465 Lin
Contemporary's Put English To Work : Interaction And Competencies For Job Success. Level 2	Podnecky, Janet. / Contemporary Books, inc.	Pod
Contemporary's Put English To Work : Interaction And Competencies For Job Success. Level 3	Cross, Carole Etchells. / Contemporary Books, Inc.	Cro
Contemporary's Put English To Work : Interaction And Competencies For Job Success. Level 6	Gearhart, Sally. / Contemporary Books, inc.	Gea
Contemporary's Put English To Work : Level 5 : Interaction And Competencies For Job Success A Conversation Book 1	Linn, Sandra. / Contemporary Books, inc.	428.2402465 Lin
A Conversation Book 1 : English In Everyday Life : Teacher's Guide 3rd Rev	Carver, Tina Kasloff, 1944- / Fotinos, Sandra Douglas, 1940- Carver, Tina Kasloff	428.24 Car
A Conversation Book 2	Carver, Tina Kasloff, 1944- / Fotinos, Sandra Douglas, 1940- Carver, Tina Kasloff / Fotinos, Sandra Douglas	428.24 Car
A Conversation : English In Everyday Life: Bk. 2	Carver, Tina Kasloff / Fotinos, Sandra Douglas	
Critical Thinking And Clinical Judgment : A Practical Approach To Outcome-focused Thinking 4th ed.	Alfaro-LeFevre, Rosalinda. / Alfaro-LeFevre, Rosalinda. Critical thinking and / clinical judgement.	610.73 Alf
Cultural Diversity In Health And Illness 3rd ed.	Spector, Rachel E., 1940-	362.10425 Spe
Davis's Comprehensive Handbook Of Laboratory And Diagnostic Tests-- With Nursing Implications	Schnell, Zoanne Burgess. / Van Leeuwen, Anne M. / Kranpitz, Todd R.	616.075 Sch
Davis's Drug Guide For Nurses [electronic Resource] 11th ed.	Deglin, Judith Hopfer, 1950- / Vallerand, April Hazard. / Teton Data Systems (Firm)	Deg

Items by Title - with Call Number

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Your Header Comment

Title	Author	Call Number
Delegation Of Nursing Care	Kelly-Heidenthal, Patricia. / Marthaler, Maureen T.	362.173068 Kel
Delmar's Fundamental & Advanced Skills Checklist 1ST	Johnson, Karrin / Johnson, Karin	610.73 Joh
Delmar's Practice Questions For NCLEX-PN	Miller, Judith C.	610.730693076 Mil
Educational Administration And Organizational Behavior	Hanson, E. Mark, 1938-	371.2 Han
Encyclopedia & Dictionary Of Medicine, Nursing, And Allied Health. 7th ed., rev. reprint.	Miller, Benjamin Frank, 1907-1971. Encyclopedia & / dictionary of medicine, nursing & allied health.	Mil
English ASAP : Connecting English To The Workplace, Student Book 2.		
English ASAP : Connecting English To The Workplace, Student Book 2.		
English ASAP : Student Book 3, Connecting English To The Workplace	Company, Steck-Vaughn	
English ASAP LVL 4 (English ASAP)	Company, Steck-Vaughn	
English Pronunciation Made Simple	Dale, Paulette. / Poms, Lillian. / Dale, Paulette. English pronunciation for Barker, Vernon C.	428.34 Dal Bar
Essential Mathematics With Applications 7th ed.	Scanlon, Valerie C., 1946- / Sanders, Tina, 1943-	612 Sca
Essentials Of Anatomy And Physiology 5th ed.	Scanlon, Valerie C., 1946- / Sanders, Tina, 1943-	612 Sca
Essentials Of Anatomy And Physiology 4th ed.	Whaley, Lucille F., 1923- / Wong, Donna L., 1948-	610.7362 Wha
Essentials Of Pediatric Nursing 2nd ed.	Townsend, Mary C., 1941-	616.890231 Tow
Essentials Of Psychiatric Mental Health Nursing : Concepts Of Care In Evidence-based Practice 4th ed.		
Essentials Of Public Speaking 4th ed.	Hamilton, Cheryl.	808.51 Ham
Essentials Of Sociology : A Down-to-earth Approach 7th ed.	Henslin, James M.	301 Hen
Ethics, Legal Issues and Professionalism in Surgical Technology 1	Jackson, Julia A. / Jackson, Ellen	
Evolve Reach Comprehensive Review For The NCLEX-PN Examination 2nd ed.		
Exploring Content : Reading For Academic Success Foundations	Smith, Lorraine C. Molinsky, Steven J. / Bliss, Bill.	468.64 Smi 428.34 Mol
Foundations And Adult Health Nursing 5th ed.	Christensen, Barbara Lauritsen. / Kockrow, Elaine Oden.	Chr
Foundations Of Adult Health Nursing 2nd ed.	White, Lois. / White, Lois. Foundations of nursing.	610.73 Whi
Foundations Of Adult Health Nursing Study Guide 2	Coward, Brandy	610.73 Cow
Foundations Of Maternal-newborn Nursing 4th ed.	Murray, Sharon Smith. / McKinney, Emily Slone.	618.20231 Mur
Foundations Of Mental Health Care 4	FNP, Michelle Morrison-Valfre RN BSN MHS	616 FNP
Foundations Of Nursing 2nd ed.	White, Lois.	610.73 Whi
Foundations Of Nursing 4th ed.	Christensen, Barbara Lauritsen. / Kockrow, Elaine Oden.	610.73 Chr
Foundations-Teacher's Guide	Molinsky, Steven J. / Bliss, Bill	
From Novice To Expert : Excellence And Power In Clinical Nursing Practice Commemorative ed.	Benner, Patricia E.	Ben
Fundamental Concepts And Skills For Nursing 2nd ed.	DeWit, Susan C.	610.73 DeW

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Title	Author	Call Number
Fundamental Concepts And Skills For Nursing 3rd ed.	DeWit, Susan C.	DeW
Fundamental Concepts And Skills For Nursing 3rd ed.	DeWit, Susan C.	650.144 All
Fundamentals Of Nursing 7th ed.	Potter, Patricia Ann. / Perry, Anne Griffin.	Pot
Fundamentals Of Nursing 6th ed.	Potter, Patricia Ann. / Perry, Anne Griffin.	Pot
Fundamentals Of Nursing 5th ed.	Potter, Patricia Ann. / Perry, Anne Griffin.	Pot
Fundamentals Of Nursing : Caring And Clinical Judgement 3rd ed.	Harkreader, Helen Chandler. / Hogan, Mary Ann, MSN.	610.73068 Har
Fundamentals Of Nursing : Concepts, Process, And Practice 4th ed.	Potter, Patricia Ann. / Perry, Anne Griffin.	610.73 Pot
Fundamentals Of Nursing : Human Health And Function 4th ed.	Craven, Ruth F. / Hirnle, Constance J.	610.73 Cra
Fundamentals Of Nursing : The Art & Science Of Nursing Care 4th ed.	Taylor, Carol, CSFN. / Lillis, Carol. / LeMone, Priscilla.	610.73 Tay
Fundamentals Success : A Course Review Applying Critical Thinking To Test Taking *	Nugent, Patricia Mary, 1944- / Vitale, Barbara Ann, 1944-	610.73 Nug
General Chemistry As A Second Language	Klein, David R., 1972-	540.711 Kle
Growth And Development Across The Lifespan : A Health Promotion Focus	Leifer, Gloria. / Hartston, Heidi.	613 Lei
Guide To Culturally Competent Health Care 2nd ed.	Purnell, Larry D.	362.1 Pur
Health Assessment Through The Life Span 4th ed.	Hogstel, Mildred O. / Curry, Linda. / Hogstel, Mildred O. Practical guide to health	616.075 Hog
Health Promotion : Mobilizing Strengths To Enhance Health, Wellness, And Well-being	Leddy, Susan.	613 Led
Health Promotion Throughout The Lifespan 5th ed.	Edelman, Carole. / Mandle, Carol Lynn.	613 Ede
Health Science. (Career Clusters.)		
Hemodynamic Monitoring : Invasive And Noninvasive Clinical Application 2nd ed.	Darovic, Gloria Oblouk.	616.10754 Dar
The Human Body In Health & Disease 4th ed.	Thibodeau, Gary A., 1938- / Patton, Kevin T.	612 Thi
The Human Body In Health & Disease 5th ed.	Thibodeau, Gary A., 1938- / Patton, Kevin T.	612 Thi
The Human Body In Health And Illness 3	Herlihy, Barbara L.	612 Her
Hypertension : A Companion To Brenner & Rector's The Kidney	Oparil, Suzanne, 1941- / Weber, Michael A.	616.132 Opa
Inquiry Into Life 12th ed. / with significant co	Mader, Sylvia S.	570 Mad
Inquiry Into Life (Laboratory Manual) Twelfth Edition	Mader, Sylvia S. / Damron, Terry / Rabitoy, Eric	570 Mad
Internet Jobs! : The Complete Guide To Finding The Hottest Internet Jobs	Kador, John.	004.678023 Kad
Introduction To Clinical Pharmacology 6th ed.	Edmunds, Marilyn W.	615.58 Edm
Introduction To General Chemistry 2d ed., 1st impression.	McCoy, Herbert Newby, 1870- / Terry, Ethel Mary, joint author.	McC
An Introduction To General Chemistry : Connecting Chemistry To Your Life 2nd ed.	Blei, Ira, 1931- / Odian, George G., 1933-	540 Ble
An Introduction To General Psychology	Ogden, Robert Morris, 1877-1959.	Ogd
Introduction To Human Anatomy And Physiology 3rd ed.	Solomon, Eldra Pearl.	612 Sol
Introduction To Human Anatomy And Physiology 3rd ed.	Solomon, Eldra Pearl.	612 Sol

Items by Title - with Call Number

26 Feb 2010 2:58 PM

Your Header Comment

Title	Author	Call Number
Introduction To Maternity & Pediatric Nursing 5th ed.	Leifer, Gloria.	618.9200231 Lei
Introduction To Medical-surgical Nursing. 4th ed. / Adrienne Dill Linton	Linton, Adrienne Dill.	610.73 Lin
Introduction To Medical-surgical Nursing. 4th ed. / Adrienne Dill Linton	Linton, Adrienne Dill.	610.73 Lin
Introduction To Microbiology : A Case History Approach 3rd ed.	Ingraham, John L. / Ingraham, Catherine A.	616.9041 Ing
An Introduction To Modern Scientific Chemistry	Cohn, Lassar, 1858- from old catalog	Coh
Introduction To Pharmacology 11th ed.	Asperheim, Mary Kaye.	615.1 Asp
Introduction To Psychology 8th ed.	Kalat, James W.	Kal
Introduction To Psychology 8th ed.	Kalat, James W.	Kal
The Job Hunter's Resource Guide [videorecording]		
Job Searching Online For Dummies (--For Dummies)	Dixon, Pam.	025.0665014 Dix
The JobBank Guide To Computer & High-tech Companies. (JobBank Series.)	Graber, Steven. / Adams Media Corporation.	331 Gra
Keys To Nursing Success	Katz, Janet R., 1953-	610.73 Kat
LabNotes : Guide To Lab & Diagnostic Tests 2nd	Hopkins, Tracey	616 Hop
Laboratory Exercise In Human Anatomy And Cat Dissections 3rd	Tortora, Gerard J.	
Legal, Ethical, And Political Issues In Nursing 2nd ed.	Aiken, Tonia D.	362.173 Aik
Lippincott's Textbook For Nursing Assistants : A Humanistic Approach To Caregiving 1st ed.	Carter, Pamela J. / Lewsen, Susan.	610.730698 Car
Lippincott's Workbook For Nursing Assistants : [a Humanistic Approach To Caregiving]	Carter, Pamela J.	610.73076 Car
The Lodging And Food Service Industry 5th ed.	Lattin, Gerald W. / Lattin, James E. / Lattin, Thomas W.	647.94023 Lat
Longman Photo Dictionary : Pronunciation And Spelling Workbook.		427.973
Managing For Quality In The Hospitality Industry	Woods, Robert H. / King, Judy Z.	647.94068 Woo
Managing Front Office Operations 6th ed.	Kasavana, Michael L., 1947- / Brooks, Richard M.	647.94068 Kas
Maternal-child Nursing Care : Optimizing Outcomes For Mothers, Children, And Families	Ward, Susan L. / Hisley, Shelton M.	618.20231 War
Maternal-Newborn Success : A Course Review Applying Thinking Skills To Test Taking 1	Desavo	610 Des
Maternal-Newborn Success : A Course Review Applying Thinking Skills To Test Taking (Davis's Success) 1	Desevo	610 Des
Maternity Nursing 7th ed.	Lowdermilk, Deitra Leonard. / Perry, Shannon E.	618.20231 Low
Maternity Nursing 6th ed.	Lowdermilk, Deitra Leonard. / Perry, Shannon E. / Piotrowski, Karen A.	610.73678 Low
Maternity Nursing : An Introductory Text 10th ed.	Leifer, Gloria. / Burroughs, Arlene.	618.2 Lei
Maternity Nursing Study Guide 7th ed.	Lowdermilk, Deitra Leonard. / Perry, Shannon E.	Low
Math And Meds For Nurses 2nd ed.	Saxton, Dolores F. / Ercolano-O'Neill, Norma. / Glavinspiehs, Colleen.	615.14 Sax
Math For Nurses : A Pocket Guide To Dosage Calculation And Drug Preparation 3rd ed.	Boyer, Mary Jo.	615.14 Boy
Math For Nurses : A Pocket Guide To Dosage Calculation And Drug Preparation 7th ed.	Boyer, Mary Jo.	Boy

Items by Title - with Call Number

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Your Header Comment

Title	Author	Call Number
The Meaning Of Sociology : A Reader. 9th ed. / Joel M. Charon, Lee	Charon, Joel M., 1939- / Vigilant, Lee Garth.	301 Cha
Med-surg Success : A Course Review Applying Critical Thinking To Test Taking medical surgical nursing 5th ed.	Colgrove, Kathryn Cadenhead. / Callicoatt, Judy. Hausman, Kathy A.	610.73076 Col Chr
Medical-surgical Nursing : A Nursing Process Approach 2nd ed.	Long, Barbara C., 1926- / Phipps, Wilma J., 1925-	610.73 Lon
Medical-surgical Nursing : Concepts & Practice	DeWit, Susan C.	DeW
Medical-surgical Nursing : Concepts & Practice	DeWit, Susan C.	DeW
Medical-surgical Nursing : Critical Thinking For Collaborative Care 5th ed.	Ignatavicius, Donna D. / Workman, M. Linda.	Ign
Medical-surgical Nursing : Critical Thinking In Client Care	LeMone, Priscilla. / Burke, Karen M.	610.73677 LeM
MedSurg Notes : Nurse's Clinical Pocket Guide (Davis's Notes) 2nd	Hopkins, Tracey / Myers, Ehren	617 Hop
Memory Notebook Of Nursing 4th ed.	Zerwekh, JoAnn Graham. / Claborn, Jo Carol. / Miller, C. J.	Zer
Merriam-Webster's Medical Desk Dictionary. Rev. ed.	Merriam-Webster, Inc.	Mer
Microbiology for Surgical Technologists 1	Frey, Kevin B. / Price, John Paul	
More Picture Stories : Language And Problem-posing Activities For Beginners	Ligon, Fred. / Tannenbaum, Elizabeth. / Rodgers, Carol Richardson.	428.24 Lig
Mosby's Comprehensive Review Of Practical Nursing For The NCLEX-PN Examination 15th ed.	Eyles, Mary O.	Eyl
Mosby's Dictionary Of Medicine, Nursing & Health Professions 7th ed.	Myers, Tamara.	610.3 Mye
Mosby's Dictionary Of Medicine, Nursing & Health Professions. 8th ed.	Mosby, Inc.	610.3 Mos
Mosby's Nursing Concept Map Creator	Giddens, Jean / Kennedy, Elaine	610 Gid
Mosby's Textbook For Nursing Assistants 6th ed.	Sorrentino, Sheila A. / Kelly, Relda Timmeney. Mosby's workbook for / nursing assistants.	Sor
Nursing Care At The End Of Life : Palliative Care For Patients And Families	Zerwekh, Joyce V. (Joyce Valborg)	616.029 Zer
Nursing Health Assessment : A Critical Thinking, Case Studies Approach 2nd ed.	Dillon, Patricia M.	Dil
Nursing Interventions & Clinical Skills 4th ed.	Elkin, Martha Keene. / Perry, Anne Griffin. / Potter, Patricia Ann.	610.73 Elk
Nursing Leadership, Management, And Professional Practice For The LPN 3rd ed.	Anderson, Mary Ann, 1946-	610.730693 And
Nursing Now! : Today's Issues, Tomorrow's Trends 5th ed.	Catalano, Joseph T.	610.73069 Cat
Nutrition (Quick Look Nursing) 2nd ed.	Farrell, Marian L. / Nicoteri, Jo Ann L.	613.2 Far
Nutrition & Diet Therapy 8th ed.	Roth, Ruth A. / Townsend,Carolynn E. Nutrition & diet therapy. / Townsend,Carolynn E.	613.2 Rot
Nutrition Essentials And Diet Therapy 10th ed.	Peckenpaugh, Nancy J.	615.854 Pec
Office Guide To Business English 2nd ed.		
Office Guide To Business Letters, Memos & Reports 2nd ed.	Rogoff, Leonard. / Ballenger, Grady.	651.75 Rog
On Writing Well : An Informal Guide To Writing Nonfiction 5th ed., rev. and updated.	Zinsser, William Knowlton.	808.042 Zin
Patient Care : Basic Skills For The Health Care Provider	Acello, Barbara.	610.73 Ace

Items by Title - with Call Number

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Title	Author	Call Number
Patterns For College Writing : A Rhetorical Reader And Guide 9th ed.	Kirszner, Laurie G. / Mandell, Stephen R.	808.0427 Kir
PDR Nurse's Drug Handbook : The Information Standard For Prescription Drugs And Nursing Considerations 2008 ed.	Spratto, George. / Woods, Adrienne L.	Spr
Pediatric Nursing : An Introductory Text 10th ed.	Price, Debra L. / Gwin, Julie F. / Price, Deborah L., 1958- Thompson's pediatric	618.9200231 Pri
Pediatric Success : A Course Review Applying Critical Thinking Skills To Test Taking 1	Richardson	378 Ric
Pharmacological Aspects Of Nursing Care 6th ed. / revised by Bonita E.	Reiss, Barry S., 1944- / Evans, Mary E., 1942- / Broyles, Bonita E.	615.1024613 Rei
Pharmacological Aspects Of Nursing Care 7th ed.	Broyles, Bonita E. / Reiss, Barry S., 1944- / Evans, Mary E., 1942-	615.1024613 Bro
Pharmacological Aspects Of Nursing Care (Study Guide) 7	Broyles, Bonita E. / Reiss, Barry S. / Evans, Mary E.	610 Bro
Pharmacology And The Nursing Process 5th ed.	Lilley, Linda Lane. / Harrington, Scott, PharmD. / Snyder, Julie S.	Lil
Pharmacology Success : A Course Review Applying Critical Thinking To Test Taking (Davis's Success Series)	Hargrove-Huttel, Ray A. / Colgrove, Kathryn Cadenhead.	615.1 Har
Physical Examination & Health Assessment 5th ed.	Jarvis, Carolyn.	616.075 Jar
Pocket Anatomy & Physiology	Jones, Shirley A.	611 Jon
Policy And Politics For Nurses : Action And Change In The Workplace, Government, Organizations And Community 2nd ed.	Mason, Diana J., 1948- / Talbott, Susan W., 1939- / Leavitt, Judith K. (Judith Kline)	362.173 Mas
The Practical Stylist 7th ed.	Baker, Sheridan Warner, 1918-	Bak
Procedures & Theory For Administrative Professionals 5th ed.	Fulton-Calkins, Patsy, 1934- / Stulz, Karin M. / Fulton-Calkins, Patsy, 1934- Procedures for the	651 Ful
Procedures Checklist To Accompany Foundations Of Nursing 2nd	Coward, Brandy / White, Lois	610 Cow
Proofreading For Business Third edition	Bogle, Mary Anderson	657 Bog
Providing Home Care : A Textbook For Home Care Aides	Leahy, William. / Fuzy, Jetta Lee. / Grafe, Julie.	362.14 Lea
Psychiatric Mental Health Nursing : Concepts Of Care In Evidence-based Practice 6th ed.	Townsend, Mary C., 1941-	616.890231 Tow
Psychiatric Mental Health Nursing Success : A Course Review Applying Critical Thinking To Test Taking (Davis's Success) 1	Curtis, Cathy Melfi / MSN / RN-BC	610 Cur
Psychiatric Mental Health Nursing Success : A Course Review Applying Critical Thinking To Test Taking (Davis's Success) 1	Curtis, Cathy Melfi / MSN / RN-BC	610 Cur
Psychology 4th ed.	Wade, Carole. / Tavis, Carol.	150 Wad
Psychology : A Concise Introduction 2nd ed.	Griggs, Richard A.	150 Gri
Psychosocial Nursing For General Patient Care 3rd ed.	Gorman, Linda M. / Sultan, Donna.	616.890231 Gor
Public Speaking For Success Rev. and updated / by Arthur R	Carnegie, Dale, 1888-1955. / Pell, Arthur R. / Carnegie, Dale, 1888-1955. Public speaking.	808.51 Car
Publication Manual Of The American Psychological Association. 4th ed.	American Psychological Association.	808.06615 Ame
Put English To Work : Level 4 1	Podnecky, Janet	428 Pod
Rehabilitation Nursing : Process, Application, & Outcomes 3rd ed.	Hoeman, Shirley P.	610.736 Hoe

Items by Title - with Call Number

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Renegotiating Health Care : Resolving Conflict To Build Collaboration 1st	Marcus, Leonard J. / Dorn, Barry C. / Kritek, Phyllis Beck	362 Mar
Rethinking America 3 : An Advanced Cultural Reader 2nd ed.	Sokolik, M. E. (Margaret E.)	Sok
Review Of Medical Microbiology And Immunology (A Lange Medical Book.) 10th ed.	Levinson, Warren.	Lev
Résumés In Cyberspace : Your Complete Guide To A Computerized Job Search	Criscito, Pat, 1953-	650.140285 Cri
Saunders Comprehensive Review For The NCLEX-PN Examination 4th ed.	Silvestri, Linda Anne.	610.730693076 Sil
Saunders Comprehensive Review For The NCLEX-PN Examination 3rd ed.	Silvestri, Linda Anne. / Silvestri, Linda Anne. Saunders comprehensive / review for NCLEX-PN.	Sil
Saunders Review Of Practical Nursing For NCLEX-PN 3rd ed. / consulting editor, M	Matassarini-Jacobs, Esther. / Barrett, Maureen B.	610.730693076 Mat
Saunders Strategies For Test Success : Passing Nursing School And The NCLEX Exam (Book & CD Rom) 2	RN, Linda Anne Silvestri MSN	610 RN,
Skills For Success : Working And Studying In English	Price-Machado, Donna.	428.24 Pri
Small Talk : More Jazz Chants From Carolyn Graham. (Oxford American English)	Graham, Carolyn.	428.34 Gra
Sociology And Nursing (Routledge Essentials For Nurses) 4th ed.	Morrall, Peter.	610.73 Mor
Sociology Matters 4th ed.	Schaefer, Richard T.	Sch
Stories From The Heart : A Reading And Writing Book For Adults	Magy, Ronna. / Mrowicki, Linda.	Mag
Structure & Function Of The Body 12th ed.	Thibodeau, Gary A., 1938- / Patton, Kevin T.	Thi
Student Lab Guide For Health Assessment For Nursing Practice 3	FNP, Susan F. Wilson RN PhD CS / BC, Jean Foret Giddens RN PhD APRN	616.075 FNP
Student Laboratory Manual For Physical Examination & Health Assesment 5th ed.	Jarvis, Carolyn.	Jar
Student Learning Guide To Accompany Basic Pharmacology For Nurses 13	RPh, Bruce D. Clayton BS PharmD / RN, Yvonne N. Stock MS	610 RPh
Student Learning Guide To Accompany Introduction To Clinical Pharmacology 4th Study	Edmunds, Marilyn W.	615 Edm
Student Workbook To Accompany Microbiology : Principles And Health Science Applications	Bergquist, Lois M. / Pogosian, Barbara.	616.01 Ber
Study Guide & Skills Performance Checklists To Accompany Potter, Perry Fundamentals Of Nursing, Fifth Edition	Ochs, GERALYN. / Potter, Patricia Ann. Fundamentals of nursing. / Castaldi, Patricia A.	Och
Study Guide And Skills Performance Checklists For Fundamentals Of Nursing 7	CMA, Patricia A. Potter PhD RN FAAN / FAAN, Anne Griffin Perry RN MSN EdD	610 CMA
Study Guide And Skills Performance Checklists To Accompany Potter, Perry Fundamentals Of Nursing 6th ed.	Ochs, GERALYN. / Castaldi, Patricia A.	610.73 Och
Study Guide And Workbook For Understanding Pathophysiology 4th ed.	Huether, Sue E.	Hue
Study Guide For Basic Pharmacology For Nurses 14	RPh, Bruce D. Clayton BS PharmD / RN, Yvonne N. Stock MS / CS, Valerie Baker RN MSN	615 RPh
Study Guide For Foundations Of Maternal-Newborn Nursing 4	C, Sharon Smith Murray MSN RN	618 C,

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Title	Author	Call Number
Study Guide For The Human Body In Health And Illness 3rd ed.	Herlihy, Barbara L.	Her
Study Guide For [Harkreader's] Fundamentals Of Nursing : Caring And Clinical Judgement 3rd ed.	Stassi, Mary E. / Harkreader, Helen Chandler. Fundamentals of / nursing : caring and clinical judgement.	Sta
Study Guide To Accompany Christensen & Kockrow Foundations Of Nursing, Fourth Edition 4th ed.	Castaldi, Patricia A. / Valdes, Margarita. / Christensen, Barbara Lauritsen.	Cas
Study Guide To Accompany Foundations Of Nursing Second Edition 2nd	Coward, Brandy	610 Cow
Study Guide To Accompany Fundamentals Of Nursing : The Art & Science Of Nursing Care	Taylor, Carol, CSFN.	Tay
Study Guide with Lab Manual for AST's Surgical Technology for the Surgical Technologist: A Positive Care Approach 3rd	A S T	
Success In Practical/Vocational Nursing : From Student To Leader (Success In Practical Nursing) 6	MA, Signe S. Hill RN BSN / MS, Helen Stephens Howlett RN BSN	610.730693 MA,
Supervision In The Hospitality Industry 3rd ed.	Kavanaugh, Raphael R. / Ninemeier, Jack D. / Daschler, John P. Supervision in the hospitality Frey, Kevin B. / Price, Paul	647.940683 Kav
Surgical Anatomy and Physiology for the Surgical Technologist 1		
Surgical Instrumentation	Phillips, Nancymarie / Sedlak, Patricia	
Surgical Technology for the Surgical Technologist: A Positive Care Approach 3	A S T / Tracey Ross, Jeffrey Lee Bidwell	
Textbook Of Basic Nursing 4th ed.	Rosdahl, Caroline Bunker.	610.73 Ros
Thinking Critically About Ethical Issues (Special Edition Series) 4th Edition	Ruggiero, Vincent Ryan	
Tools For Teams : Building Effective Teams In The Workplace	Thompson, Leigh L. / Aranda, Eileen K. / Robbins, Stephen P., 1943-	658.402 Tho
Total Patient Care : Foundations And Practice 7th ed.	Harkness, Gail A. / Dincher, Judith R., 1937-	610.73 Har
Transcultural Health Care : A Culturally Competent Approach 3rd ed.	Purnell, Larry D. / Paulanka, Betty J.	362.1089 Pur
Understanding Hospitality Law 4th ed.	Jefferies, Jack P. / Brown, Banks.	343.7307864794 Jef
Virtual Clinical Excursions 3.0 For Fundamental Concepts And Skills For Nursing 3	PHN, Susan C. deWit MSN RN CNS	362 PHN
Virtual Clinical Excursions 3.0 To Accompany Wong's Essentials Of Pediatric Nursing W/CD-ROM 7	Hockenberry, Marilyn	618 Hoc
Virtual Clinical Excursions For Fundamentals Of Nursing 7	CMAC, Patricia A. Potter PhD RN FAAN / FAAN, Anne Griffin Perry RN MSN EdD	610 CMA
Virtual Clinical Excursions For Ignatavicius And Workman Medical-surgical Nursing : Critical Thinking For Collaborative Care 5th Edition	Mathers, Dorothy. / Ignatavicius, Donna D. / Workman, M. Linda.	Mat
Virtual Clinical Excursions For Maternity And Women's Health Care 9	FAAN, Deitra Leonard Lowdermilk RNC PhD	618 FAA
Virtual Clinical Excursions, Pacific View Regional Hospital. Disk 1. Skilled Nursing Patient Set : Disk 2. Medical Surgical Patient Set [electronic Resource] Version 3.0.	Christensen, Barbara Lauritsen. Foundations and / adult health nursing. / Kockrow, Elaine Oden. Foundations and adult	Chr

Items by Title - with Call Number

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Title	Author	Call Number
Virtual Clinical Excursions, Pacific View Regional Hospital. General Hospital [electronic Resource] Version 3.0.	Harkreader, Helen Chandler. Fundamentals of / nursing. / Cooper, Kim D. Virtual clinical excursions,	Har
Virtual Clinical Excursions, Pacific View Regional Hospital. Obstetrics, Pediatrics [electronic Resource] Version 3.0.	Leifer, Gloria. Introduction to maternity & / pediatric nursing. / Crum, Kelly Ann. Virtual clinical excursions.	Lei
Virtual Clinical Excursions--medical-surgical For Lewis, Heitkemper, Dirksen, O'Brien And Bucher : Medical-surgical Nursing : Assessment And Management Of Clinical Problems, Seventh Edition 1st ed.	Mathers, Dorothy. / Lewis, Sharon Mantik. / Wolfson Informatics, LLC.	Mat
Whaley & Wong's Essentials Of Pediatric Nursing 5th ed.	Wong, Donna L., 1948- / Whaley, Lucille F., 1923-	610.7362 Won
What To Do For Senior Health : Easy To Read, Easy To Use	Barnett, Albert E. / Rushton, Nancy. / Mumaw, Lynne.	613.0438 Bar
Williams' Basic Nutrition & Diet Therapy 13th ed.	Nix, Staci. / Williams, Sue Rodwell. Basic nutrition & diet / therapy.	615.854 Nix
Williams' Essentials Of Nutrition And Diet Therapy. 9th ed. / Eleanor D. Schlenker	Schlenker, Eleanor D. / Long, Sara.	613.2 Sch
Wordsmith : A Guide To College Writing 4th ed.	Arlov, Pamela.	808.042 Arl
Workbook For Providing Home Care : A Textbook For Home Care Aides	Inc, Hartman Publishing	
The Working Culture	Hemphill, David, 1949- / Pfaffenberger, Barbara, 1950- / Hockman, Barbara.	428.64 Hem
Working It Out : Interactive English For The Workplace 1	Magy, Ronna	428 Mag
Workplace Plus : Level 4 Workbook	Saslow, Joan M. / Collins, Tim	
Workplace Plus Level 3 : Living And Working In English (Workplace Plus: Level 3)	Saslow, Joan / Collins, Tim	
Workplace Plus With Grammar Booster : Living And Working In English	Saslow, Joan M. / Collins, Tim.	Sas
Workplace Plus With Grammar Booster : Living And Working In English	Saslow, Joan M. / Collins, Tim.	428.24 Sas
Workplace Plus With Grammar Booster : Living And Working In English	Saslow, Joan M. / Collins, Tim.	428.24 Sas
Workplace Plus With Grammar Booster : Living And Working In English	Saslow, Joan M. / Collins, Tim.	428.24 Sas
Workplace Plus. 1 [sound Recording] Living And Working In English	Saslow, Joan M. / Collins, Tim.	Sas
Workplace Plus. 2 [sound Recording] : Living And Working In English	Saslow, Joan M. / Collins, Tim.	Sas
A Writer's Reference 6th ed.	Hacker, Diana, 1942- / Sommers, Nancy I. / Jehn, Thomas Robert.	Hac
A Writer's Reference 3rd ed., updated.	Hacker, Diana, 1942-	Hac
Writers INC : A Student Handbook For Writing & Learning	Sebranek, Patrick. / Meyer, Verne. / Kemper, Dave.	808.042 Seb

271 lines printed

**Vocational Nursing Program****Text Books**

Name	Author	Edition
Foundations and Adult Health Nursing	Christensen Kockcrow	6th Edition, 2010 Mosby ISBN:9780323057288
Structure & Function of the Body	Thibodeau Patton	13th Edition, 2007 Mosby ISBN:9780323049917
Introduction to Pharmacology	Asperheim Favaro	11th Edition 2009 Mosby ISBN:9781416059059
Calculate with Confidence	Gray Morris	5th Edition 2010 Mosby ISBN:9780323056298
Mosby's Drug Guide for Nurses	Skidmore- Roth	8th Edition 2010 Mosby ISBN:9780323067034
Evolve Reach Testing and Remediation Comprehensive Review for the NCLEX- PN® Examination	HESI	2nd Edition 2009 Mosby ISBN:9781416047742
Saunders Comprehensive Review for the NCLEX-PN Examination	Silvestri	4th Edition 2010 Saunders ISBN:9781416047308

**Vocational Nursing Program****Text Books****General Education:**

Name	Author	Edition
Wordsmith – A Guide to College Writing	Arlov	3 rd Edition Prentice Hall, 2007 ISBN: 9780136050544
Rethinking America 3 – An advanced Cultural Reader	Sokolik	2 nd Edition, Heine & Heine, 1999 ISBN: 9780838447321
One Flew Over the Cuckoo’s Nest	Kesey	8 th Edition, Penquin Books, Inc, 2008 ISBN: 9780143105022
The Art of Public Speaking	Lucas	9 th Edition, McGraw Hill, 2007 ISBN: 9780073135649
Essentials to Sociology – A down to Earth Approach	Henslin	7 th Edition, Prentice Hall, 2006 ISBN: 9780205504404
Introduction to Psychology	Kalat	8 th Edition, Thomas Wadsworth, 2008 ISBN: 0495102881
Essential Mathematics with applications	Barker	7 th Edition, Houghton Mifflin, 2005 ISBN: 9780618503063
Structure and Function of the Body	Thibodeau & Patton	13 th Edition, Elsevier 2008 ISBN: 0801602963
An Introduction to General Chemistry	Blei & Odian	2 nd Edition, Freeman 2006 ISBN: 9780716770732
Burton’s Microbiology for the Health Sciences	Engelkirk	8 th Edition, Lippincott Williams & Wilkins, 2007 ISBN: 9780781771955

ATTENDANCE POLICY

GENERAL ATTENDANCE POLICY

Attendance is calculated monthly and recorded by the Records Officer in the student files.

According to the Board of Vocational Nursing and Psychiatric Technicians (BVNPT), each student must complete the required number of theory, laboratory skills and hospital clinical hours (as described in your syllabus) in order to graduate and be recommended to the BVNPT for licensure.

Students who have been absent from classes for 10 (ten) consecutive school days will be dropped from the training program, unless prior approval regarding extenuating circumstances has been granted.

Special consideration will be given to students with validated extenuating circumstances such as illness, death or birth in the immediate family, or other valid reasons substantiated in writing and at the discretion of the Program Director and/or School Director.

Attendance is mandatory and is taken daily.

A student is considered absent if he/she is not present 80% (eighty percent) of the time in class at any given day.

THEORY ATTENDANCE POLICY

Absences

No more than 3 absences are permitted during a Theory Course/Module. The third absence in a Module will cause the student to be placed on probation for 30 days and/or until the end of the Module. During the probation period, the student will not be allowed to have any further absences, or will be subject to termination.

Students who miss any theory day must make-up the missed hours and objectives according to the policies contained in the “making-up missed theory hours” topic below.

Tardiness

CBD College standards consider a student late if he/she arrives 15 (fifteen) minutes after the class starts. Students arriving late for classes will receive a Tardy in their records.

Students returning back from breaks after the schedules time will be also considered late and receive a Tardy.

Students leaving the classroom early will be under the same policy as late students and will receive a Tardy.

Three tardies in a month equal to 1 (one) theory absence, requiring the student to make up a full theory day (five hours).

Students with 5 (five) consecutive Tardiness a month will be advised by the Program Director and will be subject to probation/termination.

Making Up Missed Theory Hours

According to the Board of Vocational Nursing and Psychiatric Technicians (BVNPT), each student must complete the required number of theory, laboratory skills and hospital clinical hours (as described in your syllabus). Make-up hours must be done in order to advance to the next module.

Any student who has been absent is required to meet with the theory instructor to obtain the written assignment to be completed at school, after class hours, within two weeks after the absence date. The student will have a faculty member, or the Program Coordinator initial the start time and end time of each make up session on the time sheet to verify the hours and objectives completed. Non made-up time may result in termination from the program.

The student will submit the written assignment to the theory instructor after both the assignment and missed hours have been completed. The theory instructor will review the assignment and sign it for approval. The student will then submit the completed assignment and the record of completed hours to the Program Coordinator to obtain credit for the missed time and objectives.

(Please refer to the Program Coordinator or Program Director for additional information)

CLINICAL ATTENDANCE

Clinical attendance schedule may vary and the students can be assigned to the evening and weekend rotations.

CBD College requires excellent attendance in the clinical setting so that students can get the most from their clinical rotations.

Students are required to attend all clinical work schedules and assignments and adhere to the standards of the nursing profession. Students arriving to the clinical rotations more than 15 (fifteen) minutes late are considered absent.

Students who miss a clinical assignment are at risk of not meeting their clinical objectives as required per module. Therefore, clinical absences should only be for emergencies or illnesses that require a student to stay at home, i.e., infectious or communicable diseases that are verified with their instructor.

Commitment and dedication to your clinical experiences are required in order for you to gain the knowledge needed to become competent in the real life work setting for the Vocational Nurses. Failure to meet the expected clinical objectives due to excessive absences will result in Clinical Probation or Dismissal from the Vocational Nursing Program.

Absences

Clinical absences will be monitored and enforced according to the following procedures:

Attendance is mandatory and is taken daily.

Students are to notify their clinical instructor before start of clinical assignment. No call or no show may result in probation or risk of termination.

The first and second absences in any given module will result in the student being advised by the clinical instructor.

No more than 3 (three) absences are permitted during a Clinical Module. The third absence in a Module will cause the student to be placed on probation for up to 30 days. During the probation period, the student will not be allowed to have any further absences, or will be subject to termination.

Students who miss any clinical day must make-up the missed hours and objectives according to the policies contained in the “making-up missed clinical hours” topic below.

Make-up hours must be done in order to advance to the next module. Non made-up time may result in termination from the program. Therefore, all clinical absences must be made-up.

All clinical days, along with completion of any assignments as determined by the clinical instructor must be made-up prior to advancement to the next module.

Tardiness

The clinical instructor sets the time of arrival to the clinical site. Students are expected to arrive 15 (fifteen) minutes early to any assigned clinical area. A student is considered tardy if he/she arrives within 15 (fifteen) minutes after the start of the clinical class. Arriving in the clinical area later than 15 (fifteen) minutes after a start of clinical class will be considered an absence.

Three tardies in a month equal to 1 (one) clinical absence, requiring the student to make up a full clinical day (eight hours).

Students with 5 (five) consecutive Tardiness a month will be advised by the Program Director and will be subject to probation/termination.

Making Up Missed Lab/Clinical Hours

If a student misses a clinical day, he/she must make it up within 2 (two) weeks, or before the Module ends (whichever occurs first), or the student will not be allowed to progress to the next Module. Non made-up time may result in termination from the program.

For clinical make-up time students are required to get a make-up form from the Program Coordinator, who will make the arrangements to direct the student to the clinical site where/when the student will make-up the missed time, under an instructor’s supervision.

STUDENTS MAY NOT ATTEND A CLINICAL SESSION THEY HAVE NOT BEEN DESIGNATED TO.

ATTENDANCE TO A DIFFERENT CLINICAL SITE SESSION MUST BE PREVIOUSLY AUTHORIZED BY THE PROGRAM COORDINATOR OR PROGRAM DIRECTOR, BY MEANS OF A WRITTEN REQUEST AND APPROVAL.

REMEDICATION POLICY



PLAN FOR IMPROVEMENT

A Plan for improvement will be provided for students not achieving the minimum pass score in any given test, except for the courses final tests (Module Tests).

The theory instructor will identify the areas needing improvement and will develop a plan and the steps to be followed, allowing the students, if applicable, to retake the failed test, under the retake policy conditions, observing the timeframe of 2 (two) weeks of the failed/missed test, or until the last day of the course/module, whichever occurs first.

REMEDICATION PLAN

The remediation plan is an intensive intervention to help students with failing average scores to bring their GPA to the minimum required to pass the course. This plan is developed by the theory instructor and may include tutoring sessions, research projects and other didactic methodologies applicable to address the problem.

ACADEMIC PROBATION

Students not reaching the minimum pass score average at any given month during a Module will be placed on probation and will be required to follow the Remediation Plan individually created to optimize the area(s) that brought student to probation. The probation period lasts for up to 30 days, but may be extended at the Program Director's discretion. Under no circumstances it will exceed the last day of the Module.

At the estimated end date of the probation period, if the student has achieved the minimum pass score, he/she will be off probation, and will be allowed to continue the course of studies.

Failure in achieving the minimum pass score at the end of the probation period may result in immediate termination from the program.

EVALUATIONS
OF
THEORY
AND
CLINICAL FACILITY



VOCATIONAL NURSING PROGRAM

Program Director/Instructor Evaluation of Clinical Agency

Course: _____

Unit/floors utilized: _____

Dates of courses: _____

Evaluation Area	N/A	Strongly Agree	Agree	Disagree	Strongly Disagree
Resources are available, accessible and appropriate					
Setting fulfills clinical course objectives					
Environment is conducive to learning					
Principles of safe patient practice are observed					
Professional role models are present					
Staff exhibits professional behavior/dressed properly					
Staff wears visible name tags/badges					
Paraprofessional staff is helpful to students					
Staff exhibits caring attitude to patients					
Other health members are willing to work with students					
The agency presents a professional appearance at first glance					
Staff members are polite and knowledgeable					
Extern site is clean, in order and well lighted					
Patrons or patients are acknowledged/attended properly					
Extern site has current (up to date) equipment					
Skills learned in school are/will be well applied during this externship					
Students are taught how to use the equipments properly					
Students' duties are explained properly					
Students have the opportunity to interact with patients					



Overall this experience complements the theory and skills taught in school					
If applicable: Extern site provided an adequate learning space					

A. Please describe what would be necessary to complement this externship site experience:

B. Additional comments/suggestions

Name

Date

EVALUATIONS
OF
THEORY
PRESENTATIONS



Instructor Evaluation

ACCET Document 19
Date Developed: January 1988
Date Revised: August 2005, August 2006
Pages: 1 of 1
Pertinent to: All institutions

Institution: _____ City/State: _____
Instructor: _____ Program/Course: _____
Reviewer: _____ Date: _____ Time: _____

Evaluation based on the scale of 1 to 5 for how well the Instructor meets the criteria outlined below.

	Far Below 1	Below 2	Meets 3	Exceeds 4	Far Exceeds 5	Not Observed N/O
1. Instructor uses verbal content consistent with the focus of training, including proper grammar, word selection, and usage.	<input type="checkbox"/>					
2. Instructor's pronunciation is clear and understandable.	<input type="checkbox"/>					
3. Instructor uses a variety of visual aids to enhance presentations (ex. flip charts, props, pictures, etc.).	<input type="checkbox"/>					
4. Instructor encourages student involvement in class, including questions that encourage participation, activities that engage students, and methods for checking for student understanding.	<input type="checkbox"/>					
5. Instructor demonstrates a student-centered focus, including use of effective error correction, active listening, coaching, and facilitation of discussion.	<input type="checkbox"/>					
6. Instructor uses relevant examples that support the concept, including the teaching points with highlighted applications and connections to other concepts.	<input type="checkbox"/>					
7. Instructor uses a variety of approaches to address multiple learning styles and provides appropriate supervision during practice activities.	<input type="checkbox"/>					
8. Class is well organized, with an introductory overview at the beginning and a logical linkage and sequence to the topics.	<input type="checkbox"/>					
9. Learning objectives are outlined in lesson plans or syllabi and clearly connected to the lesson being taught.	<input type="checkbox"/>					
10. Instructor demonstrates expert knowledge of subject, including explanatory examples, with accurate and expansive information beyond the textbook.	<input type="checkbox"/>					

Comments: _____

Reviewer's Signature: _____

Faculty Classroom Observation Form

Directions: This form is intended primarily as a checklist, not a scaled rating form. Reviews should indicate the presence of teaching activities/behaviors already established as indicative of effective teaching. Use NA if an item is not relevant for this class or for this instructor. To accommodate the diversity of pedagogical practices, criteria may be added with the approval of the dean for that program/discipline.

Although the observation can be used as a checklist, the observer may elect to provide a general rating for each subset of teaching practices using either a numeric or descriptive rating. Please keep in mind that the observation reflects a **"snapshot"** of teaching and is not intended as a representation of overall teaching practices. If the observer elects to provide a general rating for each subset, the following guidelines are suggested:

N - Needs Improvement

P - Proficient

A - Advanced

E - Exemplary

NA - Not Applicable

With numeric ratings, the intent is that each subset of teaching practices stands alone. There is no overall rating given to the instructor at the end of the observation form.

- When used with full-time faculty, the observation summary could be one piece of documentation used in the annual performance evaluation (PDP). It could be used by either the instructor to support Advanced or Exemplary ratings or by the Division Director to support Needs Improvement ratings.
- Division Directors, Discipline/Program Chairs, or their designees should check to make sure that the course has been approved for the online information systems and is available electronically for students. The course should include the core competency.
- The process will be expedited if observer familiarizes him/herself with the form ahead of time.
- Observer is not required to complete narrative section following each category of teaching practices. This section can be used when needed to help illustrate a concern, an exceptional teaching behavior, or general trends noticed during the observation.
- A copy of both the Classroom Observation Form and the Teaching Self-Assessment will be given to both the observer and the instructor.
- A review with instructor should be conducted as soon as possible after observation.

Instructor _____

Date _____

Course Prefix and Number _____

Course Title _____

Number of Students _____

Observer _____

Online Syllabus Posted _____

<i>Check if Observed</i>	Variety and Pacing of Instruction	Rating <input type="text"/>
	Uses a variety of instructional methods	
	Allows adequate wait time when asking questions	
	Responds to wrong answers constructively	
	Draws non-participating students into activities/discussion	
	Prevents specific students from dominating activities/discussion	
	Asks probing questions when student answers are incomplete	
	Guides the direction of the discussion	
	Refrains from answering own questions	
	Mediates conflict or differences of opinions	
	Uses active learning strategies (group work, paired discussions, polling)	
	Provides explicit directions for active learning tasks (e.g. rationale, duration, product)	
	Allows sufficient time to complete in-class assignments	
	Specifies how learning tasks will be evaluated (if appropriate)	
	Provides opportunities for students to practice what they have learned	

Examples of instructor actions or behaviors that demonstrate above.

<i>Check if Observed</i>	Organization	Rating <input type="text"/>
	Begins and ends class on time	
	Relates this and previous class(es), or provides students with opportunity to do so	
	Provides and follows an outline or organization for the class session	
	Has all necessary materials and equipment readily available	
	Uses effective transitions between class topics	
	Conveys the purpose of each class activity or assignment	
	Completes the scheduled topics	
	Summarizes periodically throughout and at end of class or prompts students to do so	
	Takes attendance throughout the semester	

Examples of instructor actions or behaviors that demonstrate above.

<i>Check if Observed</i>	Presentation Skills	Rating
	Communicates audibly and clearly	
	Establishes and maintains eye contact with students	
	Varies pace and tone to keep students alert	
	Uses a presentation style that facilitates note-taking	
	Uses positive and appropriate humor	
	Incorporates various instructional supports (film, diagrams)	
	Responds to changes in student attentiveness	
	Handouts are easy to follow	

Examples of instructor actions or behaviors that demonstrate above.

<i>Check if Observed</i>	Clarity	Rating
	Notes and explains new terms or concepts	
	Elaborates or repeats complex information	
	Uses examples to explain content	
	Makes explicit statements drawing student attention to key ideas	
	Pauses during explanations to ask and answer questions	
	Relates new ideas to familiar concepts	

Examples of instructor actions or behaviors that demonstrate above.

<i>Check if Observed</i>	Content Knowledge	Rating <input type="text"/>
	Makes accurate statements according to discipline standards	
	Incorporates current research in the field	
	Cites authorities to support statements	
	Presents divergent viewpoints	
	Makes distinctions between fact and opinion	
	Communicates the reasoning process behind operations and/or concepts	

Examples of instructor actions or behaviors that demonstrate above.

<i>Check if Observed</i>	Instructor-Student Interaction	Rating <input type="text"/>
	Attends respectfully to student comprehension or puzzlement	
	Asks questions of students that challenge them to think more deeply	
	Invites student participation and comments	
	Incorporates student responses when appropriate	
	Encourages students to respond to their peers throughout the discussions	
	Treats students with respect	
	Uses positive reinforcement to encourage student participation and intellectual risk-taking	
	Encourages students to interact civilly/respectfully with each other	
	Addresses potentially disruptive behaviors before they impact learning environment	

Examples of instructor actions or behaviors that demonstrate above.

<i>Check if Observed</i>	Use of Technology	Rating <input type="checkbox"/>
	Effectively incorporates a variety of instructional technologies to enhance student learning (PPT, websites, YouTube, blogs, etc.)	
	Uses Bb or Moodle to provide supplemental materials	

Examples of instructor actions or behaviors that demonstrate above.

<i>Check if Observed</i>	Discipline/Program Specific Teaching Behaviors	Rating <input type="checkbox"/>
	Example: Uses contextualized learning to help make content relevant for students	

Examples of instructor actions or behaviors that demonstrate above.

What went well in this class?

What suggestions for improvement do you have?

Follow-up:

EVALUATION
OF
CLINICAL
ROTATIONS



VOCATIONAL NURSING PROGRAM

Program Director/Instructor Evaluation of Clinical Agency

Course: _____

Unit/floors utilized: _____

Dates of courses: _____

Evaluation Area	N/A	Strongly Agree	Agree	Disagree	Strongly Disagree
Resources are available, accessible and appropriate					
Setting fulfills clinical course objectives					
Environment is conducive to learning					
Principles of safe patient practice are observed					
Professional role models are present					
Staff exhibits professional behavior/dressed properly					
Staff wears visible name tags/badges					
Paraprofessional staff is helpful to students					
Staff exhibits caring attitude to patients					
Other health members are willing to work with students					
The agency presents a professional appearance at first glance					
Staff members are polite and knowledgeable					
Extern site is clean, in order and well lighted					
Patrons or patients are acknowledged/attended properly					
Extern site has current (up to date) equipment					
Skills learned in school are/will be well applied during this externship					
Students are taught how to use the equipments properly					
Students' duties are explained properly					
Students have the opportunity to interact with patients					



Overall this experience complements the theory and skills taught in school					
If applicable: Extern site provided an adequate learning space					

A. Please describe what would be necessary to complement this externship site experience:

B. Additional comments/suggestions

Name

Date

EVALUATION
OF
STUDENT
ACHIEVEMENT

VOCATIONAL NURSING PROGRAM

EVALUATION METHODOLOGY FOR STUDENT PROGRESS

CBD College employs separate evaluation methodology for theory and clinical courses. The program is divided in 4 different modules. In order to successfully complete a module and progress to the following one, students must achieve the minimum score of 80% in each module (which corresponds to a “pass” on clinical evaluations). Students are evaluated in the theory and clinical contents. Students are evaluated for theory by means of exams given at the end of each topic. Each course syllabus indicates the days the exams will be given and the topics they will comprehend. For the clinical area, students are tested through a mid-term and final evaluation, and must attain a “pass” grade at the end of the clinical module, in order to progress to the following one.

The evaluation methodology and satisfactory academic progress policies are clearly stated in the student handbook, as follows:

Graduation Requirements

Program Certificates of Completion are awarded to students who complete all course work with a minimum of 80 percent grade point average and the required total number of hours (1560/2145) of the program, in no more than 150% of the total number of hours in the program.

Student's Evaluation

Student evaluations consist of monitoring student progress in theory, campus laboratory and the clinical hospital rotations on a continuing basis, and assessing students on the attainment of the objectives listed in the courses syllabi.

Basis for Theory Grading

Instructors record theory grades for each student using 100 Percent Grading Scale, as follows:

4.0	90 -100% =	A =	Excellent
3.0	85 - 89% =	B =	Good
2.0	80 - 84% =	C =	Satisfactory
1.0	75 - 79% =	D =	Unsatisfactory
	0 - 74% =	F =	Fail

Continued Evaluation

Student scores are continuously monitored. Students failing any of the theory exams in the program are required to meet with the respective instructor, who will develop a plan (“plan for improvement”) indicating the areas needing improvement and the steps to be followed, allowing them, if applicable, to retake the failed exam (see retake policy for more details).



This policy applies both to students who miss a test for any reason and to those who fail a test.

Students will have 1 (one) opportunity to retake a test, within 2 (two) weeks of the failed/missed test, or until the last day of the course/module, whichever occurs first.

The number of retakes in Modules I is limited to 3 and the number of retakes in Modules II, III, and IV is 2 per Module.

FINAL COURSE TESTS (MODULE TESTS) CANNOT BE RETAKEN.

Plan for improvement

A Plan for improvement will be provided for students not achieving the minimum pass score in any given test, except for the courses final tests (Module Tests).

The theory instructor will identify the areas needing improvement and will develop a plan and the steps to be followed, allowing the students, if applicable, to retake the failed test, under the retake policy conditions, observing the timeframe of 2 (two) weeks of the failed/missed test, or until the last day of the course/module, whichever occurs first.

Remediation Plan

The remediation plan is an intensive intervention to help students with failing average scores to bring their GPA to the minimum required to pass the course. This plan is developed by the theory instructor and may include tutoring sessions, research projects and other didactic methodologies applicable to address the problem.

Academic Probation

Students not reaching the minimum pass score average at any given month during a Module will be placed on probation and will be required to follow the Remediation Plan individually created to optimize the area(s) that brought student to probation. The probation period lasts for up to 30 days, but may be extended at the Program Director's discretion. Under no circumstances it will exceed the last day of the Module.

At the estimated end date of the probation period, if the student has achieved the minimum pass score, he/she will be off probation, and will be allowed to continue the course of studies.

Failure in achieving the minimum pass score at the end of the probation period may result in immediate termination from the program.

If during any given month the average score for a student is below 80% (eighty percent), the student will be placed on probation for no longer than 30 days and will have to comply with an individual remediation plan to optimize future scores.

Students who do not maintain the minimum pass score during a Module will be placed on probation. Failure in achieving the minimum pass score at the end of a Module may result in repetition of the Module or termination from the program.

Successful completion of the Module

Successful completion of the module requires the combination of all of the following:

- Module Average equal or above 80%;
- “Pass” evaluation on the clinical area; and
- Completion of all theory and clinical hours.

Module Averages

The Module Average will be obtained by the average of all the tests/assignments taken in the Module (except the Module Test) summed to the Module Test, and then divided by two. Module Tests cannot be retaken. If the result of the Module Average is lower than 80% (eighty percent), the student will be terminated from the program or be permitted to repeat the Module. Only one repetition of a module is allowed per program.

ATI Exams – NCLEX-PN Examination

CBD College utilizes a computerized system of tests – Comprehensive Assessment and Review Program - provided by ATI Testing to monitor students’ progress.

These tests are given after each Module, to monitor students’ progress.

In order to be recommended to the BVNPT/NCLEX-PN Examination, students must have a composite score equating to 80% (eighty percent) predicted probability of passing the NCLEX-PN.

Retake Policy

The retake policy limits students retaking an exam to earn a maximum of the minimum pass score established for the course. In case the student fails the retake, scores on the first attempt (if applicable) and on the retake will be compared and the higher score will be recorded.

Agenda Item #12.A.2.Attachment G.

April 6, 2011

Good Afternoon Ms. Cheryl,

Thank you for taking the time to talk to me Monday evening. As we discussed, I have attached a schedule of projected new class starts for the 2011-2012 program year beginning with the request that CBD College originally submitted in December 2010.

To bring us all current, on December 7, 2010, CBD College sent via FedEx documentation required for consideration of a start replacing the class graduating on March 28, 2011.

On January 18, 2010, I sent an email with the updated information from our institutional accrediting agency (ACCET) validating our program's strengths and areas of improvement. On February 14, 2011, I spoke with you in order to clarify CBD's participation at the February 2011 quarterly board meeting and to verify receipt of our documentation requesting to start a replacement class. Thank you for confirming during this conversation that you had received my email with the additional documentation. It was a pleasure to see you February 25, 2011 at the board meeting. My colleague Larisa was pleased to meet and to receive reassurance that our request to start a new class would be reviewed the week after the board meeting. We spoke again on March 18, 2011 and per our conversation at that time I resubmitted all the documentation originally sent in December 2010 via email in hopes that it would be reviewed and a decision would be made regarding our request to replace the class. We most recently spoke on Monday April 4, 2011. During this conversation you did share that the Executive Director was not available and that she was the only one to make a decision regarding a class start. You also stated that the Executive Director was anticipated to return the following week. At this point, we are kindly asking that our request to start a replacement class be revisited upon the Executive Director's return.

I understand the difficulties you and Mrs. Teresa Bello Jones face understaffed and overworked trying to answer to so many different pleas from VN programs throughout the state. I can only hope that you would be able to bring to Mrs. Jones' attention the fact that CBD College has had only one start of 15 students for the entire year. Being able to have a replacement start that we were requesting since December 2010. This start will prevent us from losing very interested and motivated potential students. Even more importantly, losing a start out of our pattern will decrease our physical presence and make losing clinical sites inevitable. As the report from ACCET pointed out, one of our major strengths is the dedication and expertise of our faculty. One theory instructor to one module is our structure and it lends itself to providing the students with an instructor secure and confident in their module area.

I am extremely concerned that losing a start out of our pattern will create a gap that will cost us valuable faculty members. I have attached the documentation originally submitted in December 2010 for review and consideration.

I appreciate all that you continuously do for the VN programs in California. You have been very supportive of our growth here at CBD College.

Sincerely,

Alice



January 14th, 2011

Board of Vocational Nursing and Psychiatric Technicians
Ms. Cheryl Anderson-Supervising Nursing Education Consultant
2535 Capitol Oaks Drive, Suite 205
Sacramento, CA 95833

Dear Ms. Anderson,

Re: **Request a new start**

Kindly consider this letter as a formal request for your recommendation to the Board for approval of a new start of thirty (30) students for the class on March 7th, 2011.

Since the last Board meeting this organization continued to diligently intensify its efforts to ensure increase in the graduates' NCLEX pass rates and accomplished significant progress. With the implementation of ATI test banks, weekly NCLEX review sessions and integration of the critical thinking throughout the program curriculum, the pass rates have demonstrated a steady increase. The third (3rd) quarter of the National Council Licensure Examination for Practical Nurses report shows that the scores of the students that graduated in April of 2010 were at 63.64%. The year to date pass rate for the same group that graduated in April 2010 is even higher – 66.67%. Our overall quarterly pass rate increased by 16.09% and brought our third quarter pass rate to 53.13%. Our yearly pass rate also increased from 33.33% to 40.95%. This statistic proves that the corrective actions undertaken by this organization are effective and that the measures implemented by this institution lead to substantial improvement in the passage rates.

The utilized methodology has been recently validated by the findings of the visiting team from Accrediting Council for Continued Education and Training (ACCET), where the highest rating of "Exceeds the standards for Accreditation" were found in the areas of Curricula, Instructional Delivery, Instructional Personnel and Evaluation and Documentation (Please see attached the Exerts from ACCET team report).

Our rationale for requesting a new start of 30 students on March 07, 2011 is as follows.

Since April 2010, as per Board decision we were only authorized a group of 15 students that started on November 22nd, 2010. Nonetheless, utilizing institutional resources we managed to retain our entire faculty by reassigning them to supportive duties such as tutoring and skills labs to accommodate the decrease in the student body. Also, as a result of the reduction in student population we inevitably lost several clinical rotation slots but, fortunately, were able to maintain all of our clinical sites intact.

As you are well aware, CBD College has two (2) programs running concurrently: "Applied Associate of Science in Vocational Nursing (AASVN)" and our traditional "Vocational Nursing Certificate" program. The AASVN class will graduate on March 2, 2011. However, in order to ensure that all efforts are placed on successfully launching our requested new start class (for our regular VN program), we are purposely choosing to postpone the request to start a new AASVN class at this time.

I would like to reiterate that all theory instructors teaching VN curriculum at this institution have at minimum Masters Degree, with many years of experience in the field of study. All of them are kept well aware of the latest trends in modern teaching methodology. The clinical instructors are well versed in the required fields of study and provide sufficient practical skills and knowledge necessary for the students to become well prepared for their future careers as nurses.

CBD College



We All Speak the Same Language!

5724 West 3rd Street, Third Floor • Los Angeles, California 90036 • Tel. (323) 937-7772 • Fax (323) 937-4472

In summary, I sincerely hope that the improvement in the NCLEX passage statistics, as well as the findings of ACCET visiting team, as supported by attached documents, demonstrate that CBD College is well prepared to start the new class. More importantly, through continued diligent efforts and systemic overhaul of the entire educational process, starting from new approach to student selection, all the way to test and exam preparation, CHD will lead the students to successful passage of national examination.

Thank you for your attention to this matter. Should you need any additional information please do not hesitate to contact me.

Sincerely,

Alice Sorrell-Thompson

Alice Sorrell-Thompson, MBA, RN, PHN
Director, Vocational Nursing Program

Encl Enrollment Data Table
 Faculty – Clinical Assignments Table
 Faculty and Facilities Form
 OB-Peds Tracking Form
 Third quarter NCLEX passing rates report
 Exerts from ACCET team report



Excerpts from ACCET Report

Curricula - Program and Instructional Materials:

Instructional Materials: The institution maintains lesson plans and syllabi that reflect material, which is also covered in its texts. Every instructor is provided with an in-service so that they are fully aware of the teaching plans and the application to the classroom and clinical settings. The institution maintains a reference library as well as an audio-visual library for the use of the instructors and students; all materials are current and relevant and readily available. The institution has the required mannequins, equipment, and supplies in their skills lab to allow the students to become competent as they practice required skills prior to actual hands-on care.

Strengths: There are multiple computers for the use of the students; the computers are centrally located in the building where the students and the instructors have easy access. The computers used for all programs which have computer-assisted learning software installed related to meeting their clinical objectives. Each bank of computers is connected to a virtual library appropriate to each discipline. The classrooms have state of the art audio-visual equipment to enhance the learning abilities of the students. The skills labs in the institution are extremely well supplied.

Instructional Delivery - Instructional Method, Externships/Internships, Equipment/Supplies:

Instructional Method: Each faculty member is expected to follow the established lesson plan for the subject material being delivered. The faculty is evaluated by the Director of Education and program coordinators to ensure that the required material is being presented. The instructors are expected to bring their experiences to the classroom to enhance the learning abilities of the students. The instructors are using a variety of teaching strategies thus enhancing the learning abilities of their students. The lesson plan content is relevant to current industry standards and practices.

Strengths: The institution has available an assortment of teaching aids such as: overhead transparencies, audiovisuals, and PowerPoint presentations. The team observed classes during the days of the visit and found methods to include lecture, demonstration, and hands-on application. Good management skills were evident as well as active participation on the part of students.

Externships/Internships: Written policies and procedures are clear to ensure that the student and the site both have an understanding of the requirements of both. The Program Director or Nurse Administrator make a preliminary visit to assess the capabilities of the clinical sites, the types of cases that are performed, the equipment used, and the number of students and frequency the facility could accept students from the institution. A formal agreement is signed by both the institution and the site. The facilities are subject to evaluation by the Program Director at least once per module. VN students are monitored by instructors at all times as a clinical instructor is assigned to each rotation. The institution has clinical experiences in acute care settings, long-term care, emergency nursing, maternity and pediatric nursing.

Strengths: The institution demonstrated excellent communication skills with its externship partners as evidenced by documentation of communication in forms of letters, emails and



telephone conversations. The institution has a variety of excellent clinical sites, which ensure that the students are able to meet their stated objectives in these specialty areas. The site team spoke to the clinical coordinators at two (2) of the externship facilities and confirmed that the students are able to meet their required clinical objectives at those sites. Both clinical sites were impressed with the professionalism of the students, instructors, and the administration of the school. In addition, both facilities felt that the school's affiliation with their clinical sites was mutually beneficial to the students as well as the clients that the sites serve.

Equipment/Supplies: Equipment needs are discussed at the weekly administrative meetings and request for new or replacement equipment is made at that time. The school is well supplied with teaching materials that are appropriate to the specific area of nursing training being offered. The skills lab is well stocked and ensures that the students have the needed equipment to complete the objectives for each of the programs.

Strengths: The Vocational Nursing program has state of the art equipment mannequins to compensate for aspects of clinical experience that cannot be obtained in the actual clinical setting. The school is striving to ensure that the students have current equipment to give them actual hands-on experience equal or better than found in the various facilities in which students will gain employment.

Instructional Personnel-Qualifications:

Qualifications: The nursing faculty holds the appropriate educational credential(s) as set forth by the Board of Vocational Nursing and Psychiatric Technician and the Bureau for Private Post Secondary Education. All faculty members have specialized training and/or certification and work experience in their respective disciplines and they bring this valuable experience to the classroom. Excellent classroom management skills were observed, encouraging students and faculty discussion in the classroom setting.

Strengths: The institution has a clinically diverse faculty. They are well versed in their subject content specialty and very capable in their ability to bring their wealth of experience to the classroom setting. The team found that all of the instructors were academically qualified above minimum requirements and presented skills to students to enhance learning experiences and to the institution to ensure curricula is relevant and current.

Evaluation and Documentation-Participant Satisfaction

Participants Satisfaction: Seventy-five percent (75%) of the students present during the visit provided the team with positive feedback and an overwhelming support for the school. The students stated that overall they were getting an excellent education from well-prepared faculty members who were well versed in their professions. They voiced satisfaction with the actions of administration in rectifying any concerns that they had identified. The students felt that upon graduation they would be well prepared to enter the workforce.

Strengths: The degree of communication between faculty, administration staff, and the students is excellent with outcomes of student success as that hallmark of their efforts to effectively communicate. All current students and graduates interviewed by the team-expressed satisfaction and provided positive feedback about the faculty and staff.

Faculty/Student Clinical Assignments

Complete for all currently enrolled and all proposed students.

Use data for your faculty and facilities that will accurately document the status on the first clinical day for your proposed students.

School: Community Based Education and Development

Faculty name	Assigned facility	# of Students Allowed/Instructor	# of Students Actually in Group	Level of students being taught	Days of Clinical Experience	Time of Clinical Experience	Pre-conference Time	Post-conference Time
Jackson, Stephanie	Saint John of God	10/1	10	1 (team 1)	Thursday	2:30pm-11:00pm	2:30pm	10:30pm
Jackson, Stephanie	Saint John of God	10/1	10	1 (team 1)	Sunday	2.30pm-11:00pm	2:30pm	10:30pm
DeLaMerced, Noel	Country Villa Wilshire	10/1	10	1 (team 2)	Tuesday	7:00am-3:30pm	7:00am	3:00pm
DeLaMerced, Noel	Country Villa Wilshire	10/1	10	1 (team 2)	Saturday	2:30pm-11:00pm	2:30pm	10:30pm
DeLaMerced, Noel	Country Villa Wilshire	10/1	8	1 (team AASVN)	Wednesday	7:00am-3:30pm	7:00am	3:00pm
Khilkevich, Oleg	Country Villa Wilshire	10/1	7	1 (team AASVN)	Wednesday	2:30pm-11:00pm	2:30pm	10:30pm
Johnson, Paula	New Vista Post Acute Care Center	15/1	15	1 (team AASVN)	Friday	7:00am-3:30pm	7:00am	2:30pm
Antido, Sheryl	Westlake Center	10/1	10	1 (team 3)	Friday	7:00am-3:30pm	7:00am	3:00pm
Jones, Dorla	Westlake Center	10/1	10	1 (team 3)	Saturday	7:00am-3:30pm	7:00am	3:00pm
DeLaMerced, Noel	Country Villa Wilshire	10/1	7	2 (team 1)	Thursday	7:00am-3:30pm	7:00am	3:00pm
DeLaMerced, Noel	Country Villa Wilshire	10/1	8	2 (team 2)	Friday	7:00am-3:30pm	7:00am	3:00pm
Abramyan, Mike	Olympia Medical Center	12/1	12	3 (team1)	Tuesday	2:30pm-11:00pm	2:30pm	10:30pm
Jones, Dorla	New Vista Post-Acute Care Center	15/1	12	3 (team 1)	Sunday	7:00am-3:30pn	7:00am	3:00pm

Faculty name	Assigned facility	# of Students Allowed/Instructor	# of Students Actually in Group	Level of students being taught	Days of Clinical Experience	Time of Clinical Experience	Pre-conference Time	Post-conference Time
Abramyan, Mike	Olympia Medical Center	12/1	12	3 (team 2)	Friday	7:00am-3:30pm	7:00am	3:00pm
Bella, Luisa	Saint John of God	10/1	10	3 (team 2)	Saturday	7:00am-3:30pm	7:00am	3:00pm
Khilkevich, Oleg	Olympia Medical Center	12/1	0 (on hold)	3 (team 3)	Sunday	7:00am-3:30pm	7:00am	3:00pm
Pinkney, Michelle	New Vista Post-Acute Care Center	15/1	13	3 (team 4)	Tuesday	2:30pm-11:00pm	2:30pm	10:30pm
Pinkney, Michelle	New Vista Post-Acute Care Center	15/1	13	3 (team 4)	Wednesday	2:30pm-11:00pm	2:30pm	10:30pm
Lucas, Bernadette	Olympia Medical Center	12/1	10	4 (team 1,2,3) 4 on hold	Monday	2:30pm-11:00pm	2:30pm	10:30pm
Lucas, Bernadette	Olympia Medical Center	12/1	10	4 (team 1,2,3) 4 on hold	Wednesday	2.30pm-11:00pm	2:30pm	10:30pm
Khilkevich, Oleg	Olympia Medical Center	12/1	10	4 (team 1,2,3)	Saturday	7:00am-3:30pm	7:00am	3:00pm
Khilkevich, Oleg	Olympia Medical Center	12/1	0	4 (AASVN) on-hold	Sunday	7:00am-3:30pm	7:00am	3:00pm
Abramyan, Mike	Olympia Medical Center	12/1	9	4 (team1,2,3)	Monday	7:00am-2:30pm	2:30pm	10:30pm
Bella, Luisa	Kaiser Permanente	10/1	9	4 (team1,2, 3,4)	Monday	7:00am-3:30pm	7:00am	3:00pm
Bella, Luisa	Kaiser Permanente	10/1	7	4 (team 1,2,3) 4 on-hold	Wednesday	7:00am-3:30pm	7:00am	3:00pm
Antido, Sheryl	Saint John of God	10/1	10	4 (team 1,2,3) 4 on-hold	Monday	7:00am-2:30pm	2:30pm	10:30pm
Antido, Sheryl	Saint John of God	10/1	10	4 (team 1,2,3) on-hold	Saturday	7:00am-3:30pm	7:00am	3:00pm
Weakley, Freddie	Orthopaedic Hospital	2/1	2 per day per shift	4 (2 per shift)	Mon-Sun	7:00am-3:30pm	7:00am	3:00pm

Instructor
F. Weakley

Site	Level/ Team/Student	Day	Shift
Ortho	IV-I - 1 & 2	Sunday	Day
Ortho	IV-I - 1 & 2	Saturday	Day
Ortho	IV-I - 3 & 4	Monday	Day
Ortho	IV-I - 3 & 4	Thursday	Day
Ortho	IV-I - 5 & 6	Monday	Eve
Ortho	IV - I - 5 & 6	Wednesday	Day
Ortho	IV - I - 7 & 8	Wednesday	Eve
Ortho	IV - I - 7 & 8	Thursday	Eve
Ortho	IV - I - 9 & 10	Saturday	Eve
Ortho	IV - I - 9 & 10	Sunday	Eve
Ortho	IV-II - 1 & 2	Sunday	Day
Ortho	IV-II - 1 & 2	Saturday	Day
Ortho	IV-II - 3 & 4	Monday	Day
Ortho	IV-II - 3 & 4	Thursday	Day
Ortho	IV-II - 5 & 6	Monday	Eve
Ortho	IV - II - 5 & 6	Wednesday	Day
Ortho	IV - II - 7 & 8	Wednesday	Eve
Ortho	IV - II - 7 & 8	Thursday	Eve
Ortho	IV - II - 9 & 10	Saturday	Eve
Ortho	IV - II - 9 & 10	Sunday	Eve
Ortho	IV-III - 1 & 2	Sunday	Day
Ortho	IV-III - 1 & 2	Saturday	Day
Ortho	IV-III - 3 & 4	Monday	Day
Ortho	IV-III - 3 & 4	Thursday	Day
Ortho	IV-III - 5 & 6	Monday	Eve
Ortho	IV - III - 5 & 6	Wednesday	Day
Ortho	IV - III - 7 & 8	Wednesday	Eve
Ortho	IV - III - 7 & 8	Thursday	Eve
Ortho	IV - III - 9 & 10	Saturday	Eve
Ortho	IV - III - 9 & 10	Sunday	Eve
Ortho	IV-IV - 1 & 2	Sunday	Day
Ortho	IV-IV - 1 & 2	Saturday	Day
Ortho	IV-IV - 3 & 4	Monday	Day
Ortho	IV-IV - 3 & 4	Thursday	Day
Ortho	IV-IV - 5 & 6	Monday	Eve
Ortho	IV - IV - 5 & 6	Wednesday	Day
Ortho	IV - IV - 7 & 8	Wednesday	Eve
Ortho	IV - IV - 7 & 8	Thursday	Eve
Ortho	IV - IV - 9 & 10	Saturday	Eve
Ortho	IV - IV - 9 & 10	Sunday	Eve

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Community Based Education and Development

Maternity and Pediatric Tracking Form

The purpose of this form is to delineate the program's presentation of Theory instruction and Clinical Experience in Maternity Nursing and Pediatric Nursing to enrolled students and to ensure that every student receives the number of hours of theory instruction and clinical training consistent with the Board - approved curriculum.

List each student assignment for Maternity Nursing and Pediatric Nursing. Include both theory instruction and clinical experience, according to the program's instructional plan. Fill in the corresponding week of theory instruction and clinical experience from the program's instructional plan (IP). modify the form as needed to show the number of students you are requesting and the number of

Week	IP Wk # 46 (Mod. IV week 1)		IP Wk # 47 (Mod. IV week 2)		IP Wk # 48 (Mod. IV week 3)		IP Wk # 49 (Mod. IV week 4)		IP Wk # 50 (Mod. IV week 5)	
	1	2	3	4	5	6	7	8	9	10
Theory for all students	Health Promo of Infant	Health Promo: Child & Adolescent	Basic Pediatric Care	Basic Pediatric Care	Basic Pediatric Care	Child of Physical Disorder	Child of Physical Disorder	Child with mental Disorder	Pregnancy	Pregnancy
Clinical Student 1-10	Ortho - Pediatric	Ortho - Pediatric	Ortho - Pediatric	Ortho - Pediatric	Ortho - Pediatric	OLYM Oleg Sat - DAY	OLYM - Mike - Mon - DAY	OLYM Oleg Sat - DAY	OLYM - Mike - Mon - DAY	OLYM Oleg Sat - DAY
Clinical Student 11-20	OLYM Oleg Sat - DAY	OLYM - Mike - Mon - DAY	OLYM Oleg Sat - DAY	OLYM - Mike - Mon - DAY	OLYM Oleg Sat - DAY	Ortho - Pediatric	Ortho - Pediatric	Ortho - Pediatric	Ortho - Pediatric	Ortho - Pediatric
Clinical Student 21-30	OLYM - Lucas - Mon EVE	OLYM - Lucas - Wed EVE	OLYM - Lucas - Mon EVE	OLYM - Lucas - Wed EVE	OLYM - Lucas - Mon EVE	OLYM - Lucas - Wed EVE	OLYM - Lucas - Mon EVE	OLYM - Lucas - Wed EVE	OLYM - Lucas - Mon EVE	OLYM - Lucas - Wed EVE
Clinical Student AASVN	OLYM- Oleg Sun. DAY	OLYM- Oleg Wed. DAY	OLYM- Oleg Sun. DAY	OLYM Oleg Wed. DAY	OLYM- Oleg Sun. DAY	OLYM Oleg Wed. DAY	OLYM- Oleg Sun. DAY	OLYM Oleg Wed. DAY	OLYM- Oleg Sun. DAY	OLYM Oleg Wed. DAY

IP Wk # 51 (Mod. IV week 6)		IP Wk # 52 (Mod. IV week 7)		IP Wk # 53 (Mod. IV week 8)		IP Wk # 54 (Mod. IV week 9)		IP Wk # 55 (Mod. IV week 10)		IP Wk # 56 (Mod. IV week 11)	
11	12	13	14	15	16	17	18	19	20	21	22
Care of Mother and Newborn	Care of Mother and Newborn	High Risk Mother	Basic Mental Health	Basic Mental Health	Care of Pt Psych Disorder	Care of Pt Psych Disorder	Drugs for Anxiety	Drugs for Anxiety	Care of Pt Addictive Personality	Care of Pt Addictive Personality	Leadership
SJG - Antido - Mon - DAY	SJG - Antido - Sat - DAY	SJG - Antido - Mon - DAY	SJG - Antido - Sat - DAY	SJG - Antido - Mon - DAY	OLYM - Oleg - Sat - DAY	OLYM - Mike - Mon - DAY	OLYM - Oleg - Sat - DAY	OLYM - Mike - Mon - DAY	OLYM - Oleg - Sat - DAY	OLYM - Mike - Mon - DAY	OLYM - Oleg - Sat - DAY
OLYM - Oleg - Sat - DAY	OLYM - Mike - Mon - DAY	OLYM - Oleg - Sat - DAY	OLYM - Mike - Mon - DAY	OLYM - Oleg - Sat - DAY	SJG - Antido - Mon - DAY	SJG - Antido - Sat - DAY	SJG - Antido - Mon - DAY	SJG - Antido - Sat - DAY	SJG - Antido - Mon - DAY	Kaiser - Bella - Wed - DAY	Kaiser - Bella - Mon - DAY
Ortho - Pediatric	Ortho - Pediatric	Ortho - Pediatric	Ortho - Pediatric	Ortho - Pediatric	Kaiser - Bella - Mon - DAY	Kaiser - Bella - Wed - DAY	Kaiser - Bella - Mon - DAY	Kaiser - Bella - Wed - DAY	Kaiser - Bella - Mon - DAY	SJG - Antido - Sat - DAY	SJG - Antido - Mon - DAY
SJG - Antido - Mon - DAY	SJG - Antido - Sat - DAY	SJG - Antido - Mon - DAY	SJG - Antido - Sat - DAY	SJG - Antido - Mon - DAY	Ortho - Pediatric	Ortho - Pediatric	Ortho - Pediatric	Ortho - Pediatric	Ortho - Pediatric	Kaiser - Thompson - Thurs - DAY	Kaiser - Thompson - Thurs - DAY

IP Wk # 57 (Mod. IV week 12)		IP Wk # 58 (Mod. IV week 13)		IP Wk # 59 (Mod. IV week 14)		IP Wk # 60 (Mod. IV week 15)	
23	24	25	26	27	28	29	30
Leadership	Leadership	Leadership	Supervision	Rehab	Rehab	Ped Review	Mat Review
OLYM - Mike - Mon - DAY	OLYM Oleg Sat - DAY	OLYM - Mike - Mon - DAY	Kaiser - Bella - Wed DAY	Kaiser - Bella - Mon DAY	Kaiser - Bella - Wed DAY	Kaiser - Bella - Mon DAY	Kaiser - Bella - Wed DAY
Kaiser - Bella - Wed DAY	Kaiser - Bella - Mon DAY	Kaiser - Bella - Wed DAY	OLYM Oleg Sat - DAY	OLYM - Mike - Mon - DAY	OLYM Oleg Sat - DAY	OLYM - Mike - Mon - DAY	OLYM Oleg Sat - DAY
SJG - Antido - Sat - DAY	SJG - Antido- Mon - DAY	SJG - Antido - Sat - DAY	OLYM - Mike - Mon - DAY	OLYM Oleg Sat - DAY	OLYM - Mike - Mon - DAY	OLYM Oleg Sat - DAY	OLYM - Mike - Mon - DAY
Kaiser - Thompson - Thurs DAY	Kaiser - Thompson - Thurs DAY	Kaiser - Thompson - Thurs DAY	OLYM - Oleg - Sun - DAY	OLYM - Oleg - Wed - DAY	OLYM - Oleg - Sun - DAY	OLYM - Oleg - Wed - DAY	OLYM - Oleg - Sun - DAY



Calendar of Proposed New Starts for Program Year 2011-2012

Request a replacement start: Vocational Nursing - Class size of 30 replacing class of 40 students that graduated 3/27/2011. This request was sent December 2010. Would like to start in May 23, 2011.

Request a replacement start: Associate of Applied Science Vocational Nursing - Class size of 15 replacing class that graduated 03/04/2011. Would like to start June 20, 2011.

CBD College pattern of VN (non-degree) class starts 2011-2012:

VN- Class size of 30 to begin April 2011(revised to start May 23, 2011 pending Board approval)

VN - Class size of 30 to begin **August 2011**

VN - Class size of 30 to begin **November 2011**

VN - Class size of 30 to begin **April 2012**

VN - Class size of 30 to begin **August 2012**

VN - Class size of 30 to begin **November 2012**

Please complete the following Enrollment Data Table for all classes currently enrolled and for those that are proposed.

School Name: Community Based Education and Development.

ENROLLMENT DATA			
CLASS DATES		#Students Admitted at time of class start	Total Enrollment: #Students who are still in the class
Date class started or will start	Date class will Complete		
11/30/2009 ✓	03/27/2011 ✓	40	39 ✓
04/05/2010 ✓	07/24/2011 ✓	40	35 ✓
11/29/2010 ✓	03/26/2012	15 ✓	15
10/05/2009 ✓	03/04/2011 (1) ✓	9	7 ✓
3/7/2011	6/24/2012 (2)	30	30

Signature: _____ Date: _____

1. AAS Class-approved as a different start
2. Proposed start

ENROLLMENT DATA				
CLASS DATES		#Students Admitted at time of class start	#Students who are still in class	Total Enrollment
Date class started or will start	Date class will Complete			
11/30/2009	03/27/2011	40	39	39
04/05/2010	07/24/2011	40	35	35+39=74
11/29/2010	03/26/2012	15	15	15+74=89
10/05/2009	03/04/2011 (1)	9	7	7+89=96
3/7/2011	6/24/2012 (2)	30	30	30+96=126

Signature: _____ Date: _____

- 3. AAS Class-approved as a different start
- 4. Proposed start

10/15/2010

NATIONAL COUNCIL LICENSURE EXAMINATION
FOR PRACTICAL NURSES
07/01/2010 THROUGH 09/30/2010

G4 ROLLING QUARTERS - JURISDICTION PROGRAM SUMMARY OF ALL FIRST TIME
CANDIDATES EDUCATED IN CALIFORNIA BOARD OF VOCATIONAL NURSING PSYCHIATRIC TECHNICIANS

CURRENT QUARTER: 07/01/2010 - 09/30/2010
YEAR TO DATE: 10/01/2009 - 09/30/2010

PROGRAM SCHOOL CODE	CITY	GRAD DATE	CAND	PASS	FAIL	% PASS	CAND	PASS	FAIL	% PASS
04-237	LOS ANGELES	04-10	22	14	8	63.64	24	16	8	66.67
		12-09	7	2	5	28.57	34	17	17	50.00
		10-09	1	1	0	100.00	5	2	3	40.00
		08-09	2	0	2	0.00	2	0	2	0.00
		07-09	0	0	0	0.00	28	7	21	25.00
		03-09	0	0	0	0.00	0	0	0	0.00
		10-08	0	0	0	0.00	3	1	2	33.33
		04-08	0	0	0	0.00	1	0	1	0.00
		TOTAL	32	17	15	53.13	105	43	62	40.95
		04-208	GARDEN GROVE	06-10	7	7	0	100.00	7	7
03-10	7			6	1	85.71	37	34	3	91.89
11-09	3			3	0	100.00	43	38	5	88.37
06-09	0			0	0	0.00	32	30	2	93.75
06-09	0			0	0	0.00	13	13	0	100.00
03-09	0			0	0	0.00	3	3	0	100.00
12-08	0			0	0	0.00	1	1	0	100.00
03-07	0			0	0	0.00	1	0	1	0.00
TOTAL	17			16	1	94.12	137	126	11	91.97
04-213	SAN DIEGO			08-10	0	0	0	100.00	9	9
		02-10	4	3	1	75.00	19	16	3	84.74
		11-09	0	0	0	0.00	5	4	1	80.00
		08-09	0	0	0	0.00	21	20	1	95.24
		05-09	0	0	0	0.00	1	0	1	0.00
		02-09	0	0	0	0.00	2	1	1	50.00
		11-08	0	0	0	0.00	1	0	1	0.00
		08-08	0	0	0	0.00	1	1	0	100.00
		TOTAL	13	12	1	92.31	59	53	6	89.83
		04-181	SAN BERNARDINO	07-10	6	5	1	83.33	6	5
04-10	16			13	3	81.25	18	15	3	83.33
02-10	1			1	0	100.00	24	24	0	100.00
11-09	0			0	0	0.00	15	13	2	86.67
10-09	0			0	0	0.00	15	13	2	86.67
08-09	0			0	0	0.00	23	16	7	69.57
07-09	0			0	0	0.00	15	12	3	80.00
04-09	0			0	0	0.00	7	5	2	71.43
12-02	0			0	0	0.00	1	1	0	100.00
TOTAL	23			19	4	82.61	124	104	20	83.87

Agenda Item #12.A.2.Attachment H.

April 8, 2011

Good Day Ms. Cheryl,

Thank you so much for contacting me this morning. I am looking forward to seeing you at the Board meeting in May. With respect to CBD College's submission of projected class starts, I deeply appreciate your assistance with this matter.

CBD has the structure ready to start our requested April 2011 start the first (1st) Monday after the May board meeting as well as for the start of our Associate of Applied Science Degree in Nursing on June 20, 2011.

We have pre-requisite courses that are offered free of charge that we would like to begin scheduling in anticipation of these starts. We continue to have a steady influx of potential students. I would like to be able to confidently set a date to begin this course work. Would you please verify with me if we are on the right track.

In response to your question regarding CBD College's exit policy, I am grateful you brought to my attention the concern regarding timely reporting of faculty termination. I am aware that upon termination of VN faculty, I must notify the BVNPT in writing within ten (10) days of the termination. Information required includes: identifying the specific faculty, their position and the date of termination. Please be assured this process is in place and will be enforced.

As always, your guidance is invaluable. I am at your disposal should you need anything additional information.

Blessed be,
Alice

Agenda Item #12.A.2 Attachment I



STATE AND CONSUMER SERVICES AGENCY • GOVERNOR EDMUND G. BROWN, JR.

BOARD OF VOCATIONAL NURSING & PSYCHIATRIC TECHNICIANS
2535 Capitol Oaks Drive, Suite 205, Sacramento, CA 95833-2945
Phone (916) 263-7800 Fax (916) 263-7859 Web www.bvnpt.ca.gov



DATE: May 3, 2011

TO: Board Members

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

SUBJECT: Community Based Education & Development College Vocational Nursing Program – Reconsideration of Provisional Accreditation and Consideration of Request to Admit Students (Director: Alice Sorrell – Thompson, Los Angeles, Los Angeles County, Private)

Community Based Education & Development College Vocational Nursing Program is presented to the Board for reconsideration of its provisional accreditation. The program's status was changed to provisional accreditation on May 20, 2010, for the one – year period from May 20, 2010, through May 31, 2011. That action was taken due to the program's noncompliance with Section 2530 (l) of the Vocational Nursing Rules and Regulations which 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 14 quarters. This data substantiates the program's continued 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
Oct – Dec 2007	76%	63%	- 13
Jan – Mar 2008	75%	64%	- 11
Apr - Jun 2008	74%	51%	- 23
Jul - Sep 2008	74%	52%	- 22
Oct – Dec 2008	73%	46%	- 27
Jan – Mar 2009	72%	38%	-34
Apr – Jun 2009	70%	39%	-31
Jul - Sep 2009	72%	32%	-40
Oct – Dec 2009	73%	31%	-42
Jan – Mar 2010	74%	33%	-41
Apr – Jun 2010	75%	33%	-42
Jul – Sep 2010	75%	41%	-34
Oct – Dec 2010	76%	43%	-33
Jan – Mar 2011	77%	48%	-29

The program requests approval to admit 30 students into its non – degree class to **replace** students who graduated March 27, 2011, and admit 15 students into its degree – class commencing June 6, 2011, with a projected graduation of September 12, 2012. Additionally, the program requests approval to admit a class of 30 students into the non – degree class commencing August 8, 2011, with a projected graduation of November 14, 2012.

History of Prior Board Actions

- On September 10, 2004, the Executive Officer approved the Community Based Education and Development College's request to begin a vocational nursing program with an initial full – time class of 30 students on October 4, 2004, only; **and** approved the program curriculum for 1560 hours, including 582 theory and 978 clinical hours.
- **On February 8, 2005, a new program director was approved.**
- On March 24, 2005, the director notified the Board that commencement of the initial class had been delayed from October 4, 2004, to May 2, 2005, with a completion date of June 29, 2006.
- On February 7, 2006, the director notified the Board that the completion date for the initial class was changed to July 20, 2006.
- On May 12, 2006, the Executive Officer approved initial full accreditation for the Community Based Education and Development College Vocational Nursing Program for the period May 12, 2006, through May 11, 2010, and issued a certificate accordingly.

Additionally, the Executive Officer approved the program's request to admit 60 students starting July 31, 2006, to **replace** students graduating July 20, 2006, only

thereby increasing class size from 30 to 60 students per class. The projected completion date for the replacement class is September 28, 2007.

- On January 9, 2007, the Executive Officer approved the program's request to admit 60 students into a full – time class commencing January 15, 2007, with a projected completion date of March 21, 2008.
- On April 10, 2008, the Executive Officer approved the program's request to admit 10 students into a full-time class beginning on May 5, 2008, with a projected graduation date of August 18, 2009, thereby increasing frequency of admissions.
- On March 18, 2009, the program was notified that its average annual pass rate had fallen below 10 percentage points of the state average annual pass rate for the past four (4) quarters. The program was requested to submit a written plan for improving their NCLEX-PN[®] pass rates by April 2, 2009.
- On May 14, 2009, the program was notified that its average annual pass rate had fallen below 10 percentage points of the state average annual pass rate for the past five (5) quarters.
- On July 16, 2009, the program was notified that its average annual pass rate had fallen below 10 percentage points of the state average annual pass rate for the past six (6) quarters. The program was requested to submit documentation that verified that elements of its plan of correction were being carried out and the effects of the employed interventions.
- **On August 10, 2009, a new program director was approved.**
- On September 8, 2009, the program was notified that its average annual pass rate had fallen below 10 percentage points of the state average annual pass rate for the past seven (7) quarters.
- On February 24, 2010, the program was notified that its average annual pass rate had fallen below 10 percentage points of the state average annual pass rate for the past eight (8) quarters.
- On April 26, 2010, the assigned consultant contacted the director relative to the admission of five (5) classes without prior Board approval.
- On April 27, 2010, the Board received electronic correspondence from the director relative to the program's understanding that ongoing admissions had been approved.
- On May 14, 2010, the Board received electronic correspondence from the director alleging approval by a prior consultant. A copy of a Board report dated April 10, 2008 was attached. The Board's official report dated April 10, 2010 does not reflect the same information as submitted by the director.

- On May 20, 2010, the Board placed the program on provisional accreditation for the one-year period from May 20, 2010, through May 31, 2011, and issued a notice to the program to identify specific areas of noncompliance and requirements for correction as referenced in Section 2526.1 (e) of the California Code of Regulations; required the program to show documented progress by submitting a follow-up report in ten (10) months to include a comprehensive analysis of the program, specific actions taken to improve program pass rates, timelines for expected results, and the effectiveness of corrective actions taken to address the following elements:
 - a. Current Student 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.

Additionally, the program is required 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 2525.

The Board denied the program's request to admit 30 students commencing August 2, 2010, to replace students completing program requirements July 25, 2010. The program was required to admit no further classes without prior Board approval.

- On June 11, 2010, the program submitted electronic correspondence requesting approval to admit students to **replace** the class graduating July 25, 2010.
- On June 22, 2010, the Board forwarded correspondence notifying the program of specific areas of noncompliance and requirements for correction as referenced in Section 2526.1 (e) of the Vocational Nursing Rules and Regulations.
- On July 12, 2010, the Board received correspondence from the program with a copy of program correspondence dated June 10, 2010, current and projected enrollment data, information relative to faculty: student assignments, clinical rotations, and a FedEx shipment travel history.

- On July 28, 2010, the Board received notification per telephone that the program had mailed documents to the residence of President Vertido, stating the school had been unable to find another mailing address for the Board.
- On July 30, 2010, the Board received program correspondence dated July 26, 2010, sent to the residence of President Vertido, relative to a request to admit students July 26, 2010.
- On August 3, 2010, the director notified the Board that the number of students requested had been reduced to 30.
- On August 6, 2010, the Executive Officer deferred action on the program's request to admit students to the Board for consideration at the September 16, 2010 meeting. This decision was based on the program's pass rate statistics and previous Board action to deny students with a 33% pass rate. The consultant notified the director of the decision per telephone.
- On August 6, 2010, the Executive Officer was notified that the program administration had contacted President Vertido at his residence regarding the program's placement on the September 2010 agenda.
- On August 13, 2010, the Board forwarded correspondence to the director relative to contact with Board members.
- On August 19, 2010, the Board's legal counsel and the Supervising Nursing Education Consultant (SNEC) conducted a conference call with the program director, school DOE, and the school's legal counsel. The purpose of the call was to clarify the program's request for documents and achieve resolution.
- On September 16, 2010, the Board denied the Community Based Education & Development College Vocational Nursing Program's request to admit 30 students commencing August 9, 2010, to **replace** students completing program requirements July 25, 2010. The Board approved the program's admission of 15 students on November 2, 2010, with a projected graduation of March 26, 2012.
- On September 28, 2010, the Board forwarded correspondence to the director relative to decisions rendered at the September 16, 2010 Board meeting.
- On January 18, 2011, the Board received the program's electronic correspondence and supporting documents requesting approval to admit a new class on March 7, 2011.
- On February 14, 2011, the SNEC spoke with the director relative to clarification as to the absence of the program's request on the agenda for the February 25, 2011, Board meeting. The director was informed that the Board had scheduled reconsideration of the program's provisional accreditation status at the May 20, 2011 meeting.
- On February 28, 2011, the Board received the program's follow – up report.

- On April 4, 2011, the SNEC discussed with the director the program's request for approval to admit a new class. The director was informed that the request was scheduled for consideration by the Board at the May 20, 2011 meeting.
- On April 6, 2011, the Board received electronic correspondence from the director relative to the status of the program and the admission of future classes.
- On April 8, 2011, the Board received electronic correspondence from the director relative to the program's correction of identified violations.
- On April 18, 2011, the Supervising Nursing Education Consultant sent correspondence to the director requesting the submission of documents for Board presentation.

Enrollment

The program requires prior Board approval for the admission of each class. The program offers a 63 – week full – time course of instruction, successful completion resulting in issuance of a diploma. Additionally, the program offers a 74 – week full – time course of instruction, successful completion resulting in an Associate of Arts degree. 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 **current and proposed** class starts and completions. The table indicates a **maximum enrollment of 137 students** from **April 2009 through August 2011**.

ENROLLMENT DATA				
CLASS DATES		#Students Admitted	#Students Current or Completed	Total Enrolled
Start	Complete			
4/09 (Unapproved - D)		40	30	30
8/09 (Unapproved - D)		33	30	30 + 30 = 60
10/09 (Unapproved - AA)		9	7	60 + 7 = 67
11/09 (Unapproved - D)		40	35	67 + 35 = 102
4/10 (Unapproved - D)		35	35	102 + 35 = 137
	7/10 (4/09 Class)		-30	137 - 30 = 107
	11/10 (8/09 Class)		-30	107 - 30 = 77
11/10		15	15	77 + 15 = 92
	3/11 (10/09 Class)		-7	92 - 7 = 85
	3/11 (11/09 Class)		-39	85 - 39 = 46
5/11 (Proposed)		30		46 + 30 = 76
6/11 (Proposed)		15		76 + 15 = 91
	7/24/11 (4/10 Class)		-35	91 - 35 = 56
8/11 (Proposed)		30		56 + 30 = 86

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 March 2011, specify the pass percentage rates for graduates of Community Based Education & Development 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 Average Quarterly Pass Rate	Program Average Annual Pass Rate	State Average Annual Pass Rate
Oct - Dec 2007	1	1	100%	76%	63%	76%
Jan - Mar 2008	23	14	61%	75%	64%	75%
Apr - June 2008	11	3	27%	70%	51%	74%
July - Sep 2008	27	14	52%	74%	52%	74%
Oct - Dec 2008	21	7	33%	73%	46%	73%
Jan - Mar 2009	23	7	30%	70%	38%	72%
Apr - Jun 2009	21	8	38%	71%	39%	70%
July - Sep 2009	23	6	26%	74%	32%	72%
Oct - Dec 2009	20	6	30%	76%	31%	73%
Jan - Mar 2010	26	10	38%	76%	33%	74%
Apr - Jun 2010	27	10	37%	74%	33%	75%
Jul - Sep 2010	32	17	53%	76%	41%	75%
Oct - Dec 2010	22	9	41%	77%	43%	76%
Jan - Mar 2011	31	18	58%	80%	48%	77%

*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 recent data available (January – March 2011), the program's average annual pass rate is 48%. The California average annual pass rate for graduates from accredited vocational nursing programs who took the NCLEX-PN® for the first time during the same period is 77%. The pass rate for the Community Based Education & Development College Vocational Nursing Program is **29** 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 program's Board – approved faculty totals seventeen (17), including the program director. Of the total faculty, seventeen (17) are approved to teach in the clinical area.

Based on a maximum enrollment of 137 students, ten (10) instructors are needed. Therefore, the number of 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 was 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 Community Based Education and Development College Vocational Nursing Program has failed to achieve an annual average pass rate on the NCLEX-PN® that is within ten (10) percentage points of the state average annual pass rate.

On December 12, 2008, the program submitted a plan for improving program pass rates. As specified therein, the following interventions were implemented.

- **Curriculum.** The number of theory hours was increased from 582 to 600 hours. The sequence of content was revised to better ensure students’ progressive mastery of content. Critical thinking was integrated throughout the curriculum.
- **Instructional Methods and Materials.** Presentations on critical thinking were added to faculty meetings. Instructors were required to implement role-play, case studies, and other methodologies into theory presentations to enhance student comprehension.

On August 10, 2009, the current program director was approved.

On February 24, 2010, the consultant notified the program that its average annual pass rate had fallen below 10 percentage points of the state average annual pass rate for the past eight (8) quarters. The program was requested to complete an analysis of all program elements and submit a written plan for improving their NCLEX-PN® pass rates. That plan was received April 14, 2010 with a revision submitted April 28, 2010.

As presented therein, the program’s report addressed the following areas.

- **Revised Admission Criteria.**

The program has revised its Admission Criteria. Effective with the next class, applicants for program admission were required to meet the following criteria.

1. No less than 18 years of age.
2. High school graduation or equivalent thereof.
3. Complete the Assessment Technologies Institute (ATI) – CPAt with a minimum score of 40%.

➤ **Revised Curriculum.**

The director reported an analysis of the modular curriculum. Based thereon, the sequence of theory content in Module 1 was revised to include a foundation of Anatomy and Physiology.

➤ **Revised Grading Policy.**

Students are required to achieve a minimum score of 80% on all examinations. Additionally, a minimum grade point average of 80% is required.

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

The program requires all students to complete a comprehensive final examination per module with a minimum score of 80%. Additionally, students are required to complete the following ATI Level Examinations.

1. Fundamentals of Nursing Practice.
2. Mental Health Nursing Practice.
3. Pharmacology of Nursing Practice.
4. Nutrition for Nursing.
5. Adult Medical – Surgical Nursing.
6. Maternal – Newborn Nursing.
7. Nursing Care of Children.
8. Leadership and Management for Nursing Practice.

While the program does not require a minimum score on the ATI Level Examinations for class progression, the information is used to assess students' grasp of critical nursing concepts.

➤ **Improved Monitoring of Student Academic Progress.**

The director reports the development of an academic improvement program whereby students are provided early intervention for academic deficits. As presented, the program begins with a student's failure of any subject examination. The instructor and student develop an intensive remediation program with counseling, tutorials, and reevaluation.

On May 20, 2010, the Board placed the program on provisional accreditation for the one – year period from May 20, 2010, through May 31, 2011. Additionally, the program was required 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 2525. The Board denied the program's request to admit 30 students commencing August 2, 2010, to replace students completing program requirements July 25, 2010. The program was required to admit no further classes without prior Board approval. **At that time, the program's average annual pass rate was 31%, 42 percentage points below the state average annual pass rate.** (See Attachment A)

On June 11, 2010, the program submitted electronic correspondence requesting approval to admit students to replace the class graduating July 25, 2010.

On June 22, 2010, the Board forwarded correspondence notifying the program of specific areas of noncompliance and requirements for correction as referenced in Section 2526.1 (e) of the Vocational Nursing Rules and Regulations. (See Attachment B)

On September 16, 2010, the Board denied the Community Based Education & Development College Vocational Nursing Program's request to admit 30 students commencing August 9, 2010, to **replace** students completing program requirements July 25, 2010. The Board approved the program's admission of 15 students on November 2, 2010, with a projected graduation of March 26, 2012. (See Attachment C)

On September 28, 2010, the Board forwarded correspondence to the director relative to decisions rendered at the September 16, 2010 Board meeting. (See Attachment D)

On January 18, 2011, the Board received the program's electronic correspondence and supporting documents requesting approval to admit a new class on March 7, 2011. (See Attachment E)

On February 14, 2011, the SNEC spoke with the director relative to clarification as to the absence of the program's request on the agenda for the February 25, 2011, Board meeting. The director was informed that reconsideration of the program's provisional accreditation status was scheduled for Board consideration at the May 20, 2011 meeting.

On February 28, 2011, the Board received the program's follow – up report. (See Attachment F)

As specialized therein, the program reported implementation of the following changes:

A. Revised Screening and Selection Criteria.

The director reported revision of the program's Screening and Selection Criteria relative to the Assessment Technologies Institute (ATI) – CPAt. Candidates for program admission are required to achieve the following minimum scores.

Content Category	Prior Required Minimum Score	New Minimum Score
Reading	43	50
Language Usage	42	50
Numerical skills	41	50

B. Utilization of New Assessment Tests.

The director reported students are required to complete ATI Assessment Tests at the conclusion of each module. As presented, the results assist in monitoring student progress.

On April 4, 2011, the SNEC discussed with the director the program's request for approval to admit a new class. The SNEC confirmed that the request was scheduled for consideration by the Board at the May 20, 2011 meeting. The director was requested to forward the program's plan for admission of future classes during 2011 and 2012.

On April 6, 2011, the Board received electronic correspondence from the director relative to the status of the program and the admission of future classes. (See Attachment G)

On April 8, 2011, the SNEC confirmed the program's current faculty with the director. A violation of existing regulations relative to the program's failure to notify the Board of the termination of faculty was identified and communicated to the director. The director was requested to submit correspondence addressing the violation and the program's correction. Subsequently, the Board received program correspondence relative to correction of the identified violation. (See Attachment H)

The following table summarizes the program's performance statistics since placement on provisional accreditation.

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
Oct – Dec 2009	20	6	30%	75%	31%	72%
Jan – Mar 2010	26	10	38%	76%	33%	74%
Apr – Jun 2010	27	10	37%	74%	33%	75%
Jul – Sep 2010	32	17	53%	76%	41%	75%
Oct – Dec 2010	22	9	41%	77%	43%	76%
Jan – Mar 2011	31	18	58%	80%	48%	77%

*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.

Program performance statistics specify that 138 program candidates completed the NCLEX-PN® during the period January 2010 through March 2011. Of the total tested, 64 program candidates passed the NCLEX-PN®, for an average **annual** pass rate of 46%; 74 candidates failed (54%).

In summary, the program has failed to bring its average annual pass rate to no more than ten (10) percentage points below the State average annual pass rate for the past fourteen (14) consecutive quarters. Data available for the most recent period (January – March 2011) substantiates that the program's average annual pass rate of **48%** is **29** percentage

points below the state average annual pass rate. However, it must also be noted that the program's average annual pass rate has improved from 31% to 48%, an improvement of 17 percentage points, during its one – year provisional accreditation.

On April 18, 2011, the Supervising Nursing Education Consultant sent correspondence to the director requesting the submission of documents for Board presentation (see Attachment I).

Based on submitted information and the performance of program graduates on the NCLEX-PN® from October 2007 through March 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: Board records confirm that the program failed to submit notification of faculty terminations within the time prescribed by regulation.

Correction: This violation has been **corrected**. On April 8, 2011, the Board received electronic correspondence from the director acknowledging the violation. The director confirmed implementation of procedures to ensure Board notification within ten (10) days of faculty termination in the future.

Section 2530(l) 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 #2: The program's average annual pass rate has been more than ten (10) percentage points below the state average annual pass rate for thirteen (13) consecutive quarters.

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

Recommendations:

1. Extend provisional accreditation of the Community Based Education & Development College Vocational Nursing Program for the one-year period from June 1, 2011

- through May 31, 2012, and issue a notice to the program to identify specific areas of noncompliance and requirements for correction as referenced in Section 2526.1 (e) of the California Code of Regulations (see Attachment J).
2. Require the program to bring its average annual pass rate to no more than ten (10) percentage points below the State average annual pass rate for four (4) consecutive quarters by **May 31, 2012**.
 3. Approve the program's request to admit 30 students into the non – degree class commencing May 23, 2011, graduating August 24, 2012, only, to **replace** students who graduated March 27, 2011.
 4. Approve the program's request to admit 15 students into the degree – class on June 6, 2011, with a projected graduation of September 12, 2012.
 5. Deny approval of the program's request to admit a class of 30 students into the non – degree class commencing August 8, 2011, with a projected graduation of November 14, 2012.
 6. Continue to require the program to obtain approval by the Board prior to admission of each class.
 7. Require the program to continue demonstration of progress in improvement of its pass rates on the NCLEX/PN[®].
 8. Require the program to submit a follow-up report in 9 months, but no later than **February 1, 2012**. The report must include a comprehensive analysis of the program, specific actions taken to improve program pass rates, timeline for implementation, and the effect of employed interventions. The following elements must be addressed in the analysis:
 - a. Current Student 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.

9. 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.
10. Place the program on the May 2012 Board Meeting agenda for reconsideration of provisional accreditation.

Rationale: The program has failed to bring its average annual pass rate to no more than ten (10) percentage points below the State average annual pass rate for 14 consecutive quarters. However, it must be noted that the program's performance statistics evidence an improvement of 17 percentage points while on provisional accreditation. Such improvement supports the recommendations to extend the program's provisional accreditation for one (1) year and approval of the program's admission of additional students.

By May 2012, the program will have four (4) additional quarters to demonstrate compliance.

Attachment A: Board Report Dated May 4, 2010.

Attachment B: Notification of Change in Accreditation Status Dated June 22, 2010.

Attachment C: Board Report Dated September 1, 2010.

Attachment D: Board Correspondence Dated September 28, 2010.

Attachment E: Program Electronic Correspondence Dated January 18, 2011.

Attachment F: Program Report Dated February 15, 2011; Received February 28, 2011.

Attachment G: Program Electronic Correspondence Dated April 6, 2011.

Attachment H: Program Electronic Correspondence Dated April 8, 2011.

Attachment I: Board Correspondence Dated April 18, 2011.

Attachment J: Notification of Change in Accreditation Status Draft.

Agenda Item #12.A.2. Attachment J



STATE AND CONSUMER SERVICES AGENCY • GOVERNANCE BOARD OF EDUCATION

BOARD OF VOCATIONAL NURSING & PSYCHIATRIC TECHNICIANS
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CERTIFIED MAIL

June 29, 2011

Alice L. Sorrell – Thompson, M.B.A., R.N., Director
Vocational Nursing Program
Community Based Education and Development College
5724 West 3rd Street, Third Floor
Los Angeles, CA 90036

Subject: Notice of Change in Accreditation Status

Dear Ms. Sorrell - Thompson:

Pursuant to the action of the Board of Vocational Nursing and Psychiatric Technicians (Board) on May 20, 2011, the provisional accreditation status of the Community Based Education and Development College Vocational Nursing Program has been extended for the one - period June 1, 2011, through May 31, 2012. The purpose of this letter is to explain the areas of non-compliance found and the corrections required of your program to avoid losing accreditation completely.

Once you have reviewed this letter, please sign and return the enclosed "Acknowledgement of Change in Accreditation Status" form by **Friday, July 15, 2011**.

AREAS OF NON-COMPLIANCE [VIOLATION(S)]

In accordance with Section 2526.1(c) of title 16 of the California Code of Regulations,

"The Board may place any program on provisional accreditation when that program does not meet all requirements as set forth in this chapter and in Section 2526..."

Section 2530(l) of title 16 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.

- (l) 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 program pass rates of the Community Based Education and Development College Vocational Nursing Program for the past fourteen (14) quarters are set forth in the following table.

NCLEX-PN® Licensure Examination Pass Rates			
Quarter	State Annual Average Pass Rate	Program Annual Average Pass Rate	Variance from State Annual Average Pass Rate
Oct – Dec 2007	76%	63%	- 13
Jan – Mar 2008	75%	64%	- 11
Apr - Jun 2008	74%	51%	- 23
Jul - Sep 2008	74%	52%	- 22
Oct – Dec 2008	73%	46%	- 27
Jan – Mar 2009	72%	38%	- 34
Apr – Jun 2009	70%	39%	- 31
Jul - Sep 2009	72%	32%	- 40
Oct – Dec 2009	73%	31%	- 42
Jan – Mar 2010	74%	33%	- 41
Apr – Jun 2010	75%	33%	- 42
Jul – Sep 2010	75%	41%	- 34
Oct – Dec 2010	76%	43%	- 33
Jan – Mar 2011	77%	48%	- 29

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

REQUIRED CORRECTION(S)

1. The Community Based Education and Development College Vocational Nursing Program must show documented progress satisfactory to the Board to improve the effectiveness of instruction and bring its average annual pass rate to no more than ten (10) percentage points below the State annual average pass rate for four (4) consecutive quarters by **May 31, 2012**.
2. Require the program to continue demonstration of progress in improvement of its pass rates on the NCLEX/PN®.
3. The program is required to show documented progress by submitting a follow-up report in 9 months, but no later than **February 1, 2012**. The report must include a comprehensive analysis of the program, specific actions taken to improve program pass rates, timeline for implementation, and the effect of employed interventions. The following elements must be addressed in the analysis.
 - a. Current Enrollment.
 - b. Admission Criteria.
 - c. Current Enrollment.
 - d. Admission Criteria.
 - e. Screening and Selection Criteria.
 - f. Terminal Objectives.

- g. Curriculum Objectives.
- h. Instructional Plan.
- i. Theory and Clinical Objectives for Each Course.
- j. Lesson Plans for Each Course.
- k. Textbooks.
- l. Attendance Policy.
- m. Remediation Policy.
- n. Evaluations of Theory and Clinical Faculty.
- o. Evaluations of Theory Presentations.
- p. Evaluations of Clinical Rotations and Their Correlation to Theory Presentations.
- q. Evaluation of Student Achievement.

Failure to show progress shall constitute cause for revocation of provisional accreditation.

- 4. Continue to require the program to obtain approval by the full Board prior to admission of each class.
- 5. 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 2526.

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 2012** Board Meeting agenda for reconsideration of your accreditation status. If you have additional information that you wish considered beyond the required corrections listed on page 2, you must submit this documentation by the fifteenth day of the second month prior to the 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: **Prior Board approval is required for the admission of each class.**

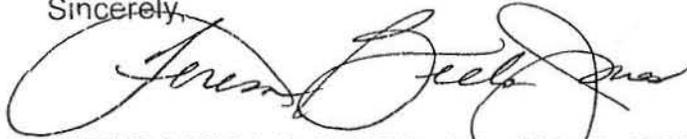
In the event your program is required to submit any report(s) as a corrective action pursuant to this notice, such reports are required in addition to any other reports required pursuant to 2527 of the Board's regulations.

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,

A handwritten signature in black ink, appearing to read "Teresa Bello-Jones". The signature is fluid and cursive, with the first name "Teresa" being particularly prominent.

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

Enclosures

cc: Board Members

TBJ:cca



TITLE 16 CALIFORNIA CODE OF REGULATIONS

Section 2526.1

2526.1. Provisional Accreditation.

- (a) Provisional accreditation means a program has not met all requirements as set forth in this chapter and in Chapter 6.5, Division 2 of the Business and Professions Code.
- (b) Provisional accreditation shall be granted for a period determined by the Board
- (c) The Board may place any program on provisional accreditation when that program does not meet all requirements as set forth in this chapter and in Section 2526. If the program has not met all requirements at the end of the initial provisional accreditation period, provisional accreditation may be extended if the program demonstrates to the satisfaction of the Board a good faith effort to correct all deficiencies.
- (d) Any program holding provisional accreditation may not admit "new" classes beyond the established pattern of admissions previously approved by the Board. The admission pattern is defined by the number of students per class and the frequency of admissions for the six class admissions that immediately precede the Board action to consider provisional accreditation.
- (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.
- (f) A material misrepresentation of fact by a vocational nursing program in any information submitted to the Board is cause for revocation of provisional accreditation.
- (g) A program whose provisional accreditation has been revoked shall be removed from the Board's list of accredited programs. The status of students as potential applicants for licensure will be determined by the Board.
- (h) A program that is removed from the Board's list of accredited programs subsequent to Board action based on the program's non-compliance with applicable regulations shall not reapply to establish a vocational nursing program for a minimum period of one calendar year.



Acknowledgement of Change in Accreditation Status

I, _____, director of _____
(Director's Name) Name of Program)

hereby acknowledge that this program's status has been changed from full accreditation to provisional accreditation. I understand that in accordance with Section 2526.1 (f) of the Vocational Nursing Rules and Regulations and Section 2581.1 (f) of the Psychiatric Technician Rules and Regulations, the Board will consider any advertisement of full accreditation while on provisional accreditation as "material misrepresentation of fact". "Material misrepresentation of fact" may lead to revocation of the program's accreditation. Further, I understand the program's provisional accreditation status will be reflected on the Board's internet website.

Please complete and return this form to the Board by July 15, 2011.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

(Signature of Director)

(Date)



Agenda Item #12.A.2. Attachment K

College

Tel (323) 937-7772

3699 Wilshire Blvd., Fourth Floor, Los Angeles, CA 90010 • Fax (323) 937-4472

BVNPT

2012 FEB 13 AM 10:45

February 10, 2012

Board of Vocational Nursing and Psychiatric Technicians
Ms. Cheryl Anderson-Supervising Nursing Education Consultant
2535 Capitol Oaks Drive, Suite 205
Sacramento, CA 95833

edee
BVNPT Received
on 2-13-12 with KR

Dear Ms. Anderson,

The following document is the results of Community Based Education and Development (CBD College) Vocational Nursing program review. This was a very enlightening process and has prompted much dialogue and active consideration of the system currently in place. The leadership and faculty of CBD College are committed to achieving and maintaining successful program outcomes: As you review this document should you have any questions or need for clarification, please do not hesitate to contact me. Thank you for all your support and guidance.

Sincerely,

Alice L. Sorrell-Thompson, MBA, RN, PHN
Director, Vocational Nursing Program
Community Based Education and Development

Community Based Education and Development VN Program Review Report

Introduction:

Community Based Education and Development (CBD College) VN program was founded to address the needs of adult learner seeking an avenue of entry into the nursing profession. CBD College is committed to implementing a nursing education program that is in alignment with the requirements of the BVNPT, providing our students the foundation necessary to assume the role of Vocational Nurses.

In June 2011, CBD College was granted an extension of our “provisional” accreditation status. In response to this, CBD College has continued the program review process the VN program.

Process:

As identified in the initial Program Review Report submitted in 2011, CBD continues to focus the program review on the five (5) identified program areas: VN program recruitment and admissions process, Structure of the VN program, Components of the VN program, VN program operations policy and VN program evaluation process. During this review period the data collection methods focused heavily on focused interviews with clinical agency staff and CBD faculty with structured discussion groups with a random 10% sampling of CBD students.

Program Review Areas:

1. Recruitment and admissions process: CBD College has a recruitment plan that targets adult learners with the desire to become effective Vocational Nurses. Our program entry requirements continue to enforce participants be at least 17 years of age, earned a high school diploma or it's equivalent, be in possession of personal documents: Social security card and legal proof of residency, successfully pass the ACT's CPAt Career Programs Assessment Test.

Action: The passing score for the CPAt was raised from: Language usage 42. Reading 43, Numerical Skills 41 to 50 in all these areas. This was part of the corrective action plan implemented during the program's 2009-2010 reporting period and is in current use to date. Our standard VN orientation program continues to offer workshops that target skills such as: study strategies, test taking, time management and utilization of student support resources. As stated in the 2011 program review, the Ad Hoc committee reviewed and piloted the Wonderlic Cognitive Ability Test to identify if a more accurate assessment of potential students' abilities to cognitively processing and problem solving could be achieved. This pilot demonstrated marginal success in enhancing the current processes already in place.

CBD College implemented the role of student services counselor in early 2010 and is in current use to date. Our VN students have benefitted greatly from support such as: social services and medical referrals, as well as referrals to community resources provided through this activity. As a result of discussions with students, the Ad Hoc committee found that having access to ancillary support resources available during enrollment was most beneficial to new students. Personalized guidance and support just prior to program entry can assist the newly enrolled student in thoroughly assessing their abilities to meet the rigors of our VN program.

To this end, the Ad Hoc committee is developing a plan to implement the role of student support in the admissions process. Currently our admissions representatives support newly enrolled students in

a limited manner. Broadening the skills base would be beneficial since the students have built a rapport with their admissions representative and thus provides students' continuity.

2. Structure of the VN Program Curriculum: The terminal objectives for the VN program were re-aligned during the 2011 program review period. These objectives are current and continue to be clustered as previously identified: Assessment, Critical Thinking, Planning, Implementation and Analysis/Evaluation.

- Assess basic physical, emotional, spiritual and cultural needs of the client utilizing head-to-toe and focused assessments.
- Collect data from available resources, including client, family, health care records health care team members, established protocols, guidelines and document findings accurately and concisely.
- Demonstrate effective communication skills with client's and team members in the practice of Nursing.
- Prioritize and carry out interventions based on the plan of care established by the Registered Nurse, making changes based on client condition, and evaluate the success of the nursing intervention.
- Safeguard the client's and the family's rights to dignity and privacy while adhering to mandatory reporting of suspected abuse.
- Utilize critical thinking to provide effective nursing care for individuals and /or groups throughout the developmental stages over the life span.
- Provide safe and effective care to clients by: (a) utilizing knowledge of normal values to identify deviations in health status; (b) utilizing the nursing process; (c) utilizing evidence based practice; (d) collaborating with health care team members to coordinate delivery of nursing care.
- Administer medications following the six (6) drug rights and monitor clients receiving parenteral therapies.
- Provide health teaching for individuals, families and /or groups that are developmentally appropriate for health promotion and disease prevention.
- Act as patient advocate.

Action: The re-aligned program outcomes as outlined in the 2011 program review are in current use to date. The program outcome objectives build on the nursing knowledge and skills to be mastered in each module. The Ad Hoc committee continues to review the validity and program accuracy of the objectives with each new module start.

In July 2010 CBD College developed an Anatomy and Physiology course as an introductory course to Module I of the VN program. This was implemented with the class that started in November 2010. This program co-hort is currently in Module IV. Based on qualitative data provided by CBD clinical faculty and clinical agency staff these students demonstrate proficiency and confidence with focused and head to toe assessment. This intervention continues to be successful for subsequent groups based on qualitative data provided by CBD theory instructors. The current VN students demonstrate increased foundational knowledge of human anatomy thus allowing the theory instructors to execute the lecture presentations more efficiently.

3. Components of VN Program: Theory and Clinical objectives are reviewed and analyzed for their congruency to the program outcomes with each module start. Lesson plans are reviewed and analyzed for effective implementation of program outcome objectives in the same manner. The VN theory and clinical objectives are the same for both the traditional and Associate of Applied Science VN programs.

Action: As a concerted effort, both clinical and theory faculty have developed a weekly dialogue to align their instructional efforts. The Ad Hoc committee is monitoring the benefit of this activity as it relates to improved exam scores and proficiency in the clinical setting.

The online student resource library implemented in October 2010 is in current use to date. This resource augments the nursing texts used and allows for both, theory and clinical instructors to develop assignments that address the most current clinical knowledge base and skills.

4. VN Program Operations: CBD College continues to enforce an attendance policy that ensures each student completes the number of theory, laboratory and clinical hours required by the BVNPT. This policy is in use to date.

The Ad Hoc committee reviewed and analyzed the current Remediation Plan for VN students. The current plan requires the theory instructor to actively assess students for academic difficulty and provide prompt intervention.

Action: CBD Instructors have clearly defined office hours after each theory day for students to access support and guidance. Instructors are encouraged to make appointments with students that are demonstrating academic difficulty as soon as the issue is identified. Individualized student remediation plans are developed during this meeting. The faculty member specifically assigned to assist with the developing and implementing student tutoring actively support the instructor as needed with student improvement plan development and direct student assistance.

Based on data collected during student discussion and faculty focus groups it was identified that both students and faculty felt that having additional assignments both in class and at home would assist in the assimilation of the concepts being presented in class as well as in the clinical setting. The Ad Hoc committee is piloting the use of in-class and homework assignments with the co-hort of students that started in November.

Based on data collected from discussions with current and graduate students the Ad Hoc committee identified that students feel a strong need for more opportunities to participate in NCLEX review. The time between program completion and when the student receives their invitation to sit for the NCLEX exam is approximately 2 months. Per the Ad Hoc committee recommendations, as of January 2012, CBD College has increased the frequency of review opportunities from one review per week to four reviews per week.

5. VN Program Evaluation Process: CBD College continues to routinely review the effectiveness of clinical and theory faculty, the classroom and clinical environment and the progress of the VN students. Each faculty member is observed in the instructional environment by the Program Director with every new module start. Faculty members are issued copies of the instructional plan upon their hire, go

through new hire orientation, by the end of which are expected to be comfortable with both. theory and clinical requirements.

With every new module start, each current clinical site is reviewed by the Program Director and the faculty assigned to that site. This review ensures that the clinical objectives of the program curriculum continue to be congruent with the experiences available at the clinical site.

Evaluating the progress of the VN students is achieved through unit and module exams and computerized knowledge assessment: ATI and NCLEX review testing.

Action: Collaboration between faculty and clinical agency staff to develop a student clinical assessment process continues at our Pediatric clinical site: Orthopedic Hospital Pediatric Urgent Care. Currently, the Ad Hoc committee is preparing to pilot a student clinical assessment process at our OB/GYN clinical site: Kaiser Permanente.

In addition, the Ad Hoc committee has commissioned a revision of CBD's VN clinical competency form. This assessment instrument was originally designed to be used in skills lab to assess and validate basic nursing skills. The revised form allows for nursing skills to be identified and assessed across the entire VN program, within specific nursing care settings.

CBD faculty continues to actively incorporate ATI into their lecture structure as a supportive resource. Beginning with the new module start, the Ad Hoc committee, faculty and administration continue to actively work directly with our ATI representative, Lisa Heinbach to fully integrate ATI resources into the VN program curriculum. Upon completion of this intervention, CBD College will submit the requested changes to the BVNPT board of approval.

Outcomes:

The program review process has provided CBD College an opportunity to examine the components of the VN program and develop a seamless flow of resources and information between them. During this program reporting year CBD College has continued to enhance our VN program to achieve and maintain our NCLEX pass rates at the level required by the BVNPT. Providing support for newly enrolled students, providing opportunities for academic growth and enrichment as well as supporting our graduates with increasing the opportunities for continued NCLEX review creates a foundation for success for our VN program and our students.

Please complete the following Enrollment Data Table for all classes currently enrolled and for those that are proposed.

**School Name: Community Based Education and Development
d/b/a CBD College
Revised 01/28/2012**

ENROLLMENT DATA			
CLASS DATES		#Students Admitted at time of class start	Total Enrollment: #Students who are still in the class
Date class started or will start	Date class will Complete		
11/29/2010	03/25/2012	15	15
*05/23/2011	09/09/2012	15	15
06/20/2011	11/18/2012	30	30
11/21/2011	03/24/2013	15	15
05/21/2012	09/07/2013	30	
		<i>only approved</i>	
		<i>(15)</i>	

Signature: _____ Date: _____

*AASVN

ENROLLMENT DATA				
CLASS DATES		#Students Admitted at time of class start	#Students who are still in class	Total Enrollment
Date class started or will start	Date class will Complete			
11/29/2010	03/25/2012	15	15	15
*05/23/2011	09/09/2012	15	15	15+15=30
06/20/2011	11/18/2012	30	30	30+30=60
11/21/2011	03/24/2013	15	15	15+60=75
05/21/2012	09/07/2013	30		

Signature: _____ Date: _____

*AASVN

ADMISSIONS



REQUIREMENTS AND PROCEDURES

Students who are at minimum 17 years of age may be accepted and enrolled if they have earned a high school diploma or its equivalent; or if they have successfully completed their education in a foreign country where that education is recognized as being equivalent to a U.S. high school diploma. Students must provide a copy of a high school diploma, an official high school diploma/GED certification or its equivalent. Based on our admissions policy, we do not enroll students under the Ability to Benefit Criteria.

To begin their college experience, applicants must complete an Admissions Application, have a personal interview with an Admissions Representative and meet Admissions Requirements (see Student Handbook). All applicants must successfully pass the CPAt ACT Test (Career Programs Assessment Test by American College Testing). Since the School's prerequisite for enrollment is a high school diploma or its equivalent, the above-mentioned test is used for admissions purposes and to determine the order of admissions when classes are full.

The school reserves the right to reject applicants based on their test scores or failure to comply with any applicable local, state or federal laws, statutes or regulations.

COURSE	CPAt ACT SCORE
Surgical Technology*	Language Usage ATB Min. Score 42
Pharmacy Technician*	Reading ATB Min. Score 43
Massage Therapy/Physical Therapy Aid*	Numerical Skills ATB Min. Score 41
Vocational Nursing *	Language Usage ATB Min. Score 50
AAS in Vocational Nursing *	Reading ATB Min. Score 50
	Numerical Skills ATB Min. Score 50

* See Student Handbook for additional admission requirements.

If the number of applicants is higher than the number of seats available for the program, students are screened based on the highest scores on the CPAt. In case the number of applicants continues to exceed the number of available seats, the determination of admission will be on a first come, first served basis, depending on the date when the application is complete.

TRANSFER STUDENTS; EVALUATION OF TRANSFER CREDIT

Students previously enrolled in any accredited college may submit their records to CBD College for review.

Students requesting to have their previously earned credits reviewed must provide officially sealed transcripts and course outlines to their admissions representative at the time of enrollment. The admissions representative will submit the documents to the Program Director, who will review and provide a written result of the review to the admissions representative. The student must have a minimum passing grade of C or better on all credits to be reviewed.

Credit Transfer "IN" Requirements:

- Course objectives and contact hours of course transferred must be similar to what CBD College offers
- Course transferred must have been completed within the last five years (*Credit for education prior to 5 years will only be granted by means of challenge examination and advising*)
- Course transferred must have been successfully completed with at least a "C"

Credit Transfer "IN" Procedure:

Student will complete the Transfer Credit Form provided by the Admissions Department and submit it with the following documentation:

- Transcripts in an officially sealed envelope (transcripts must describe the courses taken, with grades achieved and actual number of hours completed by category -theory/lab/clinical)
- School catalog or similar document containing the course description and objectives
- Copy of CNA license, if applicable

Transcripts will be evaluated upon receipt in an official sealed envelope from the accredited college the student is transferring from. Transcripts must be accompanied by the course descriptions, course syllabus and the actual number of hours completed by category (theory and clinical).

The documentation must be submitted to the admissions department at least two weeks prior to the anticipated first day of attendance. The student will be advised of the school's decision within five business days.

Official documents and exams need to be reviewed prior to the student's first day of class. No fees will be charged for testing, evaluation or granting transfer of credit.

Transfer students will be evaluated qualitatively only on the work completed while at the College.

All students must successfully complete a minimum of 50% of the program at CBD College in order to be eligible to receive a certificate/diploma from CBD College.

If a student is denied credits based on their transcript/course description(s) and/or exam a written appeal can be made to the School Director, within five calendar days of being notified of the denial, outlining circumstances for reconsideration. The student will receive a written decision to the appeal within ten calendar days. The School Director's decision is final.

CBD College does not provide credit based on achievement tests, challenge examinations, or experiential learning.

Credit Transfer "OUT" Procedure:

If a student chooses to transfer to another school, CBD College will provide an official transcript, syllabi and/or course outlines upon the student's request, which must be filed at the front desk. All required document(s) will be provided by the College within five business days.

NOTICE CONCERNING TRANSFERABILITY OF CREDITS AND CREDENTIALS EARNED AT OUR INSTITUTION

The transferability of credits you earn at CBD College is at the complete discretion of an institution to which you may seek to transfer. Acceptance of the diploma or certificate you earn in your program is also at the complete discretion of the institution to which you may seek to transfer. If the credits, diploma or certificate that you earn at this institution are not accepted at the institution to which you seek to transfer, you may be required to repeat some or all of your coursework at that institution. For this reason you should make certain that your attendance at this institution will meet your educational goals. This may include contacting an institution to which you may seek to transfer after attending CBD College to determine if your credits, diploma or certificate will transfer.

TRANSFER OR ARTICULATION AGREEMENTS

This institution has not entered into any transfer or articulation agreements with any other college or university.

READMITTED STUDENTS

To be considered for re-entry, former students must provide a detailed written explanation of the conditions that caused the original withdrawal or termination and demonstrate how those conditions have been resolved so that they can successfully continue the program of study. Applicants reentering the program will be evaluated by an instructor and/or Program Director to assess retained skills. Only one re-entry request will be considered and may be allowed.

Readmission Requirements:

- Have a cumulative overall GPA of at least 2.0 in the theory courses;
- Have a "pass" grade in the clinical courses.

Readmission Procedure:

- Provide a detailed written explanation of the conditions that caused the original withdrawal or termination and how those conditions have been resolved so that a student can reliably and successfully continue the program of study;
- Be evaluated by an instructor and/or Program Director to assess retained theory and clinical/lab skills
- Complete the recommended "plan of improvement", if necessary

Only one re-entry request per student will be considered and may be allowed per program.

Students who have been approved for readmission by the administration will be readmitted on a space available basis. Readmitted students will be evaluated qualitatively only on the work completed while at the College.

The maximum time frame will be reduced for transfer/readmitted students based upon the remaining length of the program in which they enroll. Tuition will be pro-rated based on the length of the program. Each student will need to meet with Financial Aid to determine Title IV aid eligibility, as eligibility may be reduced based on transfer credit.

SCREENING AND SELECTION CRITERIA

Requirements

To be admitted to CBD's Vocational Nursing Program, the applicant must:

- Be at least 17 years of age
- Have earned a high school diploma or its equivalent¹
- Present copies of personal documents (ID, Social Security Card and proof of legal residency in the country)
- Go through a background check
- Have an interview with an Admissions Representative
- Pass the ACT's CPAt Career Programs Assessment Test and/or ATI Test
- Attend the orientation sessions designated for the program

Procedures

Each applicant must complete an Admissions Application. The application must be accompanied by a copy of the applicant's personal documents and a copy of his/her high school diploma. Upon its submission, a personal interview with an Admissions Representative will be scheduled, and the applicant will be notified regarding the admissions exam (ACT's CPAt) date.

Alternate Status

Students may be enrolled under alternate status based on:

- a) CPAt Test score;
- b) Readiness with the required documents to join the program;
- c) ATI/TEAS assessment test results; and
- d) Attendance at orientation (scheduled before the program start date).

The number of alternate students admitted may not exceed 10% of the school's Board-approved number of students per class.

Prior to admission, the alternate students will be informed in writing of their alternate status and that they may not be able to continue with the Program, unless students with regular status are terminated or decide to drop out of the program.

Alternate students may participate in classes until the scheduled clinical experience at approved clinical facilities begins.

Upon start of clinical experience at approved clinical facilities, the actual number of students in the class may not exceed the number of students approved by the Board for that particular class.

Alternate Students will have priority on the admission for the next program start.

Note: CBD College does not enroll students under the ability-to-benefit criteria.

The school reserves the right to reject applicants based on failure to present any of the documents required or failure to comply with any applicable local, state or federal laws, statutes or regulations.

¹ The copy of the high school diploma may be replaced by an official high school transcript or GED certification. Foreign high school diploma may be accepted upon evaluation that certifies equivalency to US education.

Community Based Education and Development
D/B/A CBD College

VN Program Outcomes

Assessment

Outcome 1: Assess basic physical, emotional, spiritual and cultural needs of the client utilizing head to-toe and focused assessments.

Outcome 2: Collect data from available resources, including client, family, health care records, health care team members, established protocols, guidelines and document findings accurately and concisely.

Module I	Module II	Module III	Module IV
<ul style="list-style-type: none"> • Able to make accurate assessments at a beginning level utilizing learned data collection methods. • Differentiate normal from abnormal data and reports to clinical instructor in a timely manner. • Able to choose a preliminary nursing diagnosis from the NANDA list, based on assessment data. • With supervision, accurately documents assessment and care provided. 	<ul style="list-style-type: none"> • Able to demonstrate competency in performing as assessment on a middle-aged and elderly client. • Identifies and interprets abnormal clinical findings. • Demonstrates ability to complete a plan of care with the appropriate NANDA diagnosis based on assessment findings. • Reports all abnormal findings to clinical instructor and clinical staff involved in client care. 	<ul style="list-style-type: none"> • Able to identify cues and clues related to a suspected problem by utilizing baseline information • Correlate presented signs and symptoms with the laboratory test and diagnostic test results. • Able to demonstrate the ability to perform comprehensive history taking essential to the suspected diagnosis, which includes: personal, medical and family histories. • Demonstrates ability to perform head to toe assessment. 	<ul style="list-style-type: none"> • Able to demonstrate “mastery” of performing head-to-toe and focused assessment for adults in Medical/Surgical nursing care areas. • Able to demonstrate competency in performing assessments of Maternity and Pediatric clients. • Identifies and interprets abnormal clinical findings and appropriately intervenes with the support of the clinical instructor. • Able to demonstrate understanding of a NST tracing and identify common changes in fetal heart rates.

Community Based Education and Development
D/B/A CBD College

VN Program Outcomes

Critical Thinking

Outcome 5: Safeguard the client's and the family's rights to dignity and privacy while adhering to mandatory reporting of suspected abuse.

Outcome 6: Utilize critical thinking to provide effective nursing care for individuals and/or groups throughout the developmental stages over the life span.

Module I	Module II	Module III	Module IV
<ul style="list-style-type: none"> • Collects objective & subjective information needed for client care. • With guidance applies basic knowledge of nursing interventions to routine clinical care. • Able to explain rationales for nursing interventions. • Gathers, analyzes & interprets data appropriately. • Begins to distinguish relevant from irrelevant information, with guidance. • Organizes and clusters data with guidance. • Begins to differentiate between knowledge and opinion. • Begins to identify priorities of care based on Maslow's hierarchy of needs. 	<ul style="list-style-type: none"> • Applies theoretical knowledge to routine clinical practice. Applies appropriate rationales for nursing interventions. • Begins to interpret objective and subjective information to guide client care. • Begins to analyze complex data with guidance by instructor. • Recognizes standard patterns when clustering data. • Begins to distinguish levels of priority and possible alternatives. • Develops knowledge base and recognizes personal biases. • Implements Maslow's Hierarchy of Needs with client care. 	<ul style="list-style-type: none"> • Able to discuss and analyze anatomy and pathophysiology of the different systems and be able to correlate the presenting signs and symptoms. • Identify alternation and deviations from normal to abnormal bodily functions. • Analyze identified NANDA diagnosis with respect to patients privacy and rights with inclusion of the patients family in the plan of care. • Analyze the plan of care wholistically, with emphasis on physical, psychological and spiritual effects of the disease process on the patient. 	<ul style="list-style-type: none"> • Applies theoretical knowledge to specific areas of clinical practice: Medical/Surgical, Maternity and Pediatrics. Effectively utilizes appropriate rationales and nursing interventions. • Accurately interprets objective and subjective information to further develop client's plan of care. • Demonstrates ability to accurately assess Maternity and Pediatric clients analyze objective/subjective information and employ specific nursing interventions based on appropriate rationale. • Able to interpret and analyze complex data and accurately identify patterns of clustering data with minimal guidance from clinical instructor. • Able to effectively prioritize nursing care tasks with minimal supervision. • Incorporates Maslow's Hierarchy of needs into the planning and implementation of client's care.

Community Based Education and Development
D/B/A CBD College

VN Program Outcomes

Planning

Outcome 8: Administer medications following the six (6) drug rights and monitor clients receiving parenteral therapies.

Outcome 9: Provide health teaching for individuals, families and/or groups that are developmentally appropriate for health promotion and disease prevention.

Module I	Module II	Module III	Module IV
<ul style="list-style-type: none"> • With supervision administers medication safely and accurately following the “6 Rights” • Identifies a client’s immediate learning needs with assistance • Identifies common barriers to client learning. • Plans teaching strategies based on knowledge of growth and development; cultural awareness; and the teaching/learning process. • With guidance implements a simple, standardized teaching plan that is developmentally appropriate for health promotion and disease prevention. 	<ul style="list-style-type: none"> • Accurately administers medications by utilizing a standardized routine. • Able to assist client with meeting their healthcare needs. • Begins to develop a individualized plan of care to overcome client barriers. • Plans relevant and accurate interventions with validation for assigned clients. • Implements teaching plan to assist client with health promotion and disease prevention. • With supervision, evaluates the effectiveness of the teaching plan to maximize client adherence. 	<ul style="list-style-type: none"> • Able to identify goals of treatment to the problem, which includes: short term and long term goals. • Planning should be specific, measurable, attainable, wholistic and time bounded. • Able to utilize medical interventions as a part of the plan with careful observation of it’s effects both adverse and side effects. • Safeguard patient’s rights in the plan of care. 	<ul style="list-style-type: none"> • Safely and accurately administers medication via all routes except IV. • Able to accurately calculate pediatric doses. • Able to accurately assess immediate and long-term learning needs of client and their support system. • Able to begin developing a family centered client teaching plan that is specific and individualized. • Develops and carries out individualized client care plans in specialized nursing areas that address actual and potential client barriers to learning.

Community Based Education and Development
D/B/A CBD College

VN Program Outcomes

Implementation

Outcome 3: Demonstrate effective communication skills with client's and team members in the practice of nursing.

Outcome 4: Prioritize and carry out interventions based on the plan of care established by the registered nurse, make changes based on client condition, and evaluate the success of nursing interventions.

Outcome 10: Act as patient advocate.

Module I	Module II	Module III	Module IV
<ul style="list-style-type: none"> • With guidance, begins to use therapeutic communication skills in interactions with clients & team members. • With guidance, recognizes one's own responsibility to maintain client confidentiality. • Begins to develop cultural competencies within the nursing process. • With guidance, prioritize and implement care based on client's plan of care. • Begins to perform selected nursing interventions under supervision of clinical instructor. • Describes the role of the nurse as advocate. • Recognize situations where client could participate in planning care. 	<ul style="list-style-type: none"> • Initiates therapeutic communication skills when interacting with client and members of the health care team. • Begins to view self as essential component of client care. • Begins to identify members of client care acceptable of sharing vital information to. • With guidance, implements age and culturally appropriate plan of care. • Performs selected nursing interventions using principles of caring with assistance of nursing instructor. • With minimal prompting states rationale for more individualized nursing interventions. • Begins to behave as patient advocate in providing individualized care. 	<ul style="list-style-type: none"> • Implement nursing interventions suitable to the identified NANDA diagnosis. • Able to utilize the entire health care team in managing an identified diagnosis. • Able to include the patient and their support system in the implementation of nursing planned actions. • To act as a patient's advocate the nurse must utilize conservative measures before doing aggressive interventions. • Able to safely carry out identified nursing interventions related to NANDA diagnosis. 	<ul style="list-style-type: none"> • Able to clearly define role as active participant in client's care. • Able to identify and assemble appropriate collaborators for client's continuity of care. • Able to develop client plan of care that is linguistically and culturally appropriate. • Demonstrates clear knowledge of rationale used to develop the individualized nursing interventions. • Consistently demonstrates the behaviors of a patient advocate by providing individualized care in specialty areas.

Community Based Education and Development
D/B/A CBD College

VN Program Outcomes

Analysis/Evaluation

Outcome 7: Provide safe and effective care to clients by: (a) utilizing knowledge of normal values to identify deviations in health status; (b) utilizing the nursing process; (c) utilizing evidence based practice; (d) collaborating with health care team members to coordinate delivery of nursing care.

Module I	Module II	Module III	Module IV
<ul style="list-style-type: none"> • Recognize and verbalize short-term outcomes for assigned clients. • Uses standard precautions in all care performed. • With supervision, identifies and uses precautions needed for specific organisms. • With guidance maintains a safe work environment for self and others. • Identifies agency policies and procedures for student role in emergency situations. • Uses outcome criteria to evaluate client responses and effectiveness of care for common nursing interventions. 	<ul style="list-style-type: none"> • Identifies appropriate short term outcomes based on an individualized plan of care. • Recognizes and demonstrates understanding of contact precautions. • Begins to utilize appropriate research articles to validate nursing practice. • Able to adhere to the nursing process to guide client care. • Abides by agency policies when providing nursing care to assigned client. • Demonstrates beginning ability to prioritize nursing diagnoses with clear rationale for priority. • Begins to interrelate pathophysiology for relevant medical diagnoses when evaluating data. 	<ul style="list-style-type: none"> • Be able to achieve short term and long term goals based on identified NANDA diagnosis. • Be able to identify other measures that will further improve the plan of care for the assigned patient. • Able to determine the success/failure of planned goals based on the evaluation process. 	<ul style="list-style-type: none"> • Analyzes assessment data and identifies short and long-term outcomes. • Develops appropriate interventions and evaluates their effectiveness by comparing expected and actual outcomes. • Actively utilizing nursing journals and participates in professional development activities to enhance nursing practice. • Consistently applies the nursing process in planning and delivering client care. • Seeks out agency policy on nursing care tasks. • Able to independently prioritize nursing diagnosis with appropriate rationale.

VOCATIONAL NURSING PROGRAM

CURRICULUM OBJECTIVES

Module I

Upon successful completion of the first of four Modules of the CBD College Vocational Nursing Program the students will be able to:

- Demonstrate ability to perform head-to-toe physical assessment
- Apply the basic bedside patient care fundamental skills
- Differentiate between ethical and unethical conducts of a vocational nurse
- Acknowledge the diversity of the population and apply the care according to the culture
- Understand the importance of effective and therapeutic communication
- Develop effective patient education techniques
- Demonstrate knowledge of documentation techniques
- Indicate the knowledge of principles of Medication Administration
- Understand the concepts of critical thinking
- Understand the principles of nursing process for effective patient care
- Identify the factors involved in end-of-life care

Module II

Upon successful completion of the second of four Modules of the CBD College Vocational Nursing Program the students will be able to:

- Identify and apply the nursing process steps in Emergency/First Aid situations
- Understand the care plan of the patient with diseases on the integumentary, musculoskeletal, respiratory, cardiovascular, blood/lymphatic and immunological systems
- Apply care for the surgical patient and patients with cancer and HIV/AIDS
- Deliver nursing care with critical thinking, in an orderly, scientific manner, under the supervision of the RN
- Identify nutrition needs for patients with specific diseases on the integumentary, musculoskeletal, respiratory, cardiovascular, blood/lymphatic and immunological systems
- Identify the needs of elderly patients with specific diseases on the integumentary, musculoskeletal, respiratory, cardiovascular, blood/lymphatic and immunological systems

Module III

Upon successful completion of the third of four Modules of the CBD College Vocational Nursing Program the students will be able to:

- Understand the care plan of the patient with diseases on the neurological, sensory, gastrointestinal, urinary, endocrine, exocrine pancreatic, and reproductive system
- Deliver nursing care with critical thinking, in an orderly, scientific manner, under the supervision of the RN
- Identify nutrition needs for patients with diseases on the neurological, sensory, gastrointestinal, urinary, endocrine exocrine pancreatic, and reproductive system
- Identify the needs of elderly patients with diseases on the neurological, sensory, gastrointestinal, urinary, endocrine exocrine pancreatic, and reproductive system
- Indicate the ability to care for patients with communicable diseases

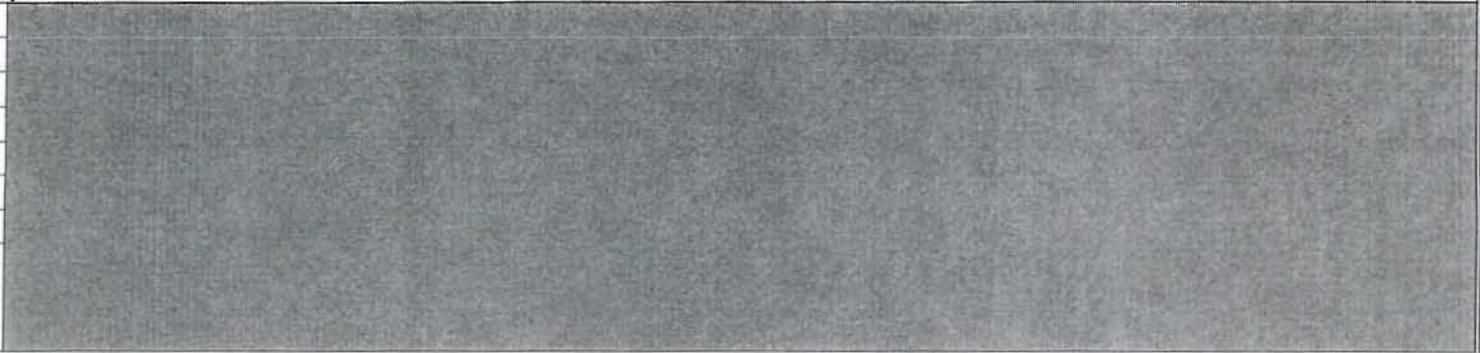
Module IV

Upon successful completion of the fourth of four Modules of the CBD College Vocational Nursing Program the students will be able to:

- Understand the basic concepts of mental health
- Deliver nursing care for a patient with psychiatric disorders
- Demonstrate ability to promote health promotion for a pregnant patient
- Understand the nursing process on labor and delivery
- Indicate the ability to care for a newborn and family with special needs
- Acknowledge the needs of patients undergoing growth and development
- Understand the care plan of a pediatric patient
- Demonstrate ability to promote health promotion for the infant, child and adolescent patient
- Identify diverse leadership styles utilized by a nurse
- Understand the functions of the State Board
- Understand the role of a nurse supervisor
- Recognize the philosophy and relevant factors of rehabilitation nursing

Breakout of Clinical Hours by Topic Areas:

Topic	Hours
Fundamentals	240
Medical-Surgical	600
Pediatrics	40
Maternity	40
Leadership	20
Supervision	20
Total Clinical Hours (should match cell P31)	960



Summary of Instructional Plan Program Hours:

Subjects Covered	Lecture	Lab/Clinical	Totals
Anatomy/Physiology	74	0	74
Communicable Diseases	25	0	25
Communication	5	0	5
Critical Thinking	22.5	0	22.5
Culturally Congruent Care	2.5	0	2.5
End-of-Life Care	5	0	5
Ethics & Unethical Conduct	5	0	5
Fundamentals of Nursing	57.5	240	297.5
Gerontological Nursing	35	0	35
Growth and Development	15	0	15
Leadership	20	20	40
Maternity Nursing	25	40	65
Medical/Surgical Nursing	131	600	731
Nursing Process	2.5	0	2.5
Nutrition	20	0	20
Patient Education	5	0	5
Pediatric Nursing	25	40	65
Pharmacology	75	0	75
Psychology	25	0	25
Rehabilitation Nursing	20	0	20
Supervision	5	20	25
Total:	600	960	1560

Course Syllabus:

Course Number	Course Title	Lecture Hours	Lab Hours	Clinical Hours	Total Clock Hours
NSG 100	Foundations of Nursing	150	-	-	150
NSG 110	Foundations of Nursing Practicum	-	128	112	240
NSG 101	Basic Clinical Concepts	150	-	-	150
NSG 111	Basic Clinical Concepts Practicum	-	24	216	240
NSG 102	Basic Clinical Concepts II	150	-	-	150
NSG 112	Basic Clinical Concepts II Practicum	-	-	240	240
NSG 103	Vocational Nursing	150	-	-	150
NSG 113	Vocational Nursing Practicum	-	-	240	240
	Total:	600	152	808	1560

Vocational Nursing Program Lesson Plan

INSTRUCTOR: _____

DATE: _____ TOPIC: _____

Module I: Week 3- Vital Signs and Physical Assessment

Objectives/Competency	Content	Method of Instruction
Vital Signs: <ol style="list-style-type: none"> 1. Define key terms related to vital signs. 2. Identify the vital signs. 3. Discuss the importance of accurately assessing vital signs. 4. Identify the guidelines for vital sign measurement. 5. List the various sites for pulse measurement 6. State the normal limits of each vital sign. 7. List the factors that affect vital sign reading. 8. Identify the rationale for each step of the vital signs procedures. 	0830-1015: Define key terms related to vital signs. Identify the vital signs. Discuss the importance of accurately assessing vital signs. Identify the guidelines for vital sign measurement.	Lecture Discussion Reading Transparencies Study Guide Audiovisual Aids Demonstration
	1015-1030: Break	Training Aides & Handouts
	1030-1200: List the various sites for pulse measurement State the normal limits of each vital sign. List the factors that affect vital sign reading. Identify the rationale for each step of the vital signs procedures.	Christensen-Kockrow (FON) Ch. 11 Pgs. 235-269 and Ch. 4 Pgs 53-80 Powerpoint presentation. Mosby clinical excursion
	1200-1245: Lunch	Evaluation Methods
Physical Assessment: <ol style="list-style-type: none"> 1. Define the key terms related to physical assessment. 2. Discuss the difference between a sign and a symptom. 3. List the cardinal signs of inflammation and infection. 4. Describe the nursing responsibilities when assisting a physician with the physical examination. 5. List equipment and supplies necessary for the physical examination/assessment 6. Discuss the nurse-patient interview and data collection techniques. 7. List the basic essentials for a patient's health history. 8. Discuss the sequence of steps when performing a nursing assessment. 9. Discuss normal and abnormal assessment findings in the head-to-toe assessment. 	1245-1345: Define the key terms related to physical assessment. Discuss the difference between a sign and a symptom. List the cardinal signs of inflammation and infection. Describe the nursing responsibilities when assisting a physician with the physical examination. List equipment and supplies necessary for the physical	Testing Case studies Return demonstration Group presentation Role-playing Instructor observation Critical thinking
		Assignments
		Study Guide: FON Ch. 4 and 11

	<p>1345-1400: Break</p> <p>1400-1500: Discuss the nurse-patient interview and data collection techniques. List the basic essentials for a patient's health history. Discuss the sequence of steps when performing a nursing assessment. Discuss normal and abnormal assessment findings in the head-to-toe assessment.</p>	
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Vocational Nursing Program Lesson Plan

INSTRUCTOR: _____

DATE: _____ TOPIC: _____

Module II: Week 10- Blood/Lymph system

Objectives/Competency	Content	Method of Instruction
Anatomy/Physiology: <ol style="list-style-type: none"> 1. Describe the components of blood. 2. Differentiate between the functions of erythrocytes, leukocytes, and thrombocytes. 3. Discuss the several factors necessary for the formation of erythrocytes. 4. Describe what the leukocyte differential means 5. Describe the blood clotting process 6. List the names of the basic blood groups. 7. Describe the generalized functions of the lymphatic system and list the primary lymphatic structures. Medical/Surgical Nursing: <ol style="list-style-type: none"> 1. Define the key terms related to blood. 2. List common diagnostic tests for evaluation of blood and lymph disorders of the hematological and lymphatic systems. 3. Define the key terms related to blood. 4. List common diagnostic tests for evaluation of blood and lymph disorders of the hematological and lymphatic systems. 5. List six signs and symptoms associated hypovolemic shock. 6. Discuss important aspects that should be presented in patient teaching and home care planning for the patient with pernicious anemia. 7. Discuss the etiology/pathophysiology, clinical manifestation assessment, diagnostic tests, medical management nursing interventions, patient teaching and prognosis for patients with acute and chronic leukemia, or multiple myeloma, malignant lymphoma and Hodgkin's disease. 	0830-1015: Describe the components of blood. Differentiate between the functions of erythrocytes, leukocytes, and thrombocytes. Discuss the several factors necessary for the formation of erythrocytes. Describe the blood clotting process	Lecture Discussion Reading Transparencies Study Guide Audiovisual aids Demonstration
	1015-1030: Break	Training Aides & Handouts
	1030-1200: List the names of the basic blood groups. Describe the generalized functions of the lymphatic system and list the primary lymphatic structures. Define the key terms related to blood. List common diagnostic tests for evaluation of blood and lymph disorders of the hematological and lymphatic systems.	Christensen-Kockrow (FON) Ch. 7 (p 286-327) Powerpoint Presentation
	1200-1245: Lunch	Evaluation Methods
	1245-1345: List common diagnostic tests for evaluation of blood and lymph disorders of the hematological and lymphatic systems. List six signs and symptoms associated hypovolemic shock.	Testing Case Study Return Demonstration Group Presentation Role playing Instructor observation Critical thinking
		Assignments
		Study guide FON Ch. 7 Blood/Lymph Disorders.

<p>8. Discuss the potential complications of diagnostic tests, treatments procedures, surgery or health alterations for the patient with a blood/lymph disorder.</p> <p>9. Discuss the unexpected response to therapy for the patient with a blood/lymph disorder.</p>	<p>1345-1400: Break</p> <p>1400-1500: Discuss important aspects that should be presented in patient teaching and home care planning for the patient with pernicious anemia. Discuss the etiology/pathophysiology, clinical manifestation assessment, diagnostic tests, medical management nursing interventions, patient teaching and prognosis for patients with acute and chronic leukemia, or multiple myeloma, malignant lymphoma and Hodgkin's disease. Discuss the potential complications of diagnostic tests, treatments and procedures.</p>	
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Vocational Nursing Program Lesson Plan

INSTRUCTOR: _____

DATE: _____ TOPIC: _____

Module III: Week 3-Care of the patient with a Visual and Auditory Disorder.

Objectives/Competency	Content	Method of Instruction
<u>Anatomy/Physiology:</u> List the major sense organs and discuss their anatomical position. List the parts of the eye and define the function of each part List the three divisions of the ear, and discuss the function of each. <u>Nursing theory:</u> Define key terms related to visual and auditory disorders. Describe two changes in the sensory system that occur as a result of the normal aging process. Describe inflammatory conditions of the lid, conjunctiva, cornea, cataracts, diabetic retinopathy, detachment, glaucoma, macular degeneration, corneal injuries, ear inflammatory and infectious disorders with etiology/pathophysiology, clinical manifestations, assessment, diagnostic tests, medical management, nursing interventions, patient teaching, and prognosis. Differentiate between conductive and sensorineural hearing loss List tips for communicating with hearing and sight impaired people Discuss the potential complications of diagnostic tests, treatments, procedures, surgery or health alterations for the patient with a visual or auditory disorder. Discuss therapeutic procedures for the patient with a visual or auditory disorder Discuss the unexpected response to therapy for the patient with a visual or auditory disorder. <u>Pharmacology:</u> Discuss the drugs used to treat visual and auditory disorders. <u>Gerontological Nursing:</u> Discuss the care of the older patient with visual	0830-1015: List the major sense organs and discuss their anatomical position. List the parts of the eye and define the function of each part List the three divisions of the ear, and discuss the function of each 1015-1030: Break 1030-1200: Describe two changes in the sensory system that occurs as a result of the normal aging process. Describe inflammatory conditions of the lid, conjunctiva, cornea, cataracts, diabetic retinopathy, detachment, glaucoma, macular degeneration, corneal injuries, ear inflammatory and infectious disorders with etiology/pathophysiology, clinical manifestations, assessment, diagnostic tests, medical management, nursing interventions, patient teaching, and prognosis. 1200-1245: Lunch 1245-1345: Differentiate between conductive and sensorineural hearing loss List tips for communicating with hearing and sight impaired people Discuss the potential complications of diagnostic tests, treatments, procedures, surgery or health	Lecture Discussion Reading Transparencies Study Guide Audiovisual Aids Demonstration Training Aides & Handouts Christensen-Kockrow (FON) Ch. 13 Pgs. 634-684. Powerpoint presentation Evaluation Methods Testing Case studies Return Demonstration Group Presentation Role-playing Instructor Observation Critical Thinking Assignments Study Guide (FON) Ch. 13

and auditory disorders.

Nutrition:

Discuss the recommended diet therapy for patients with visual and auditory disorders.

Critical Thinking:

Apply critical thinking to the treatment of a patient with visual and auditory disorders.

alterations for the patient with a visual or auditory disorder.

Discuss therapeutic procedures for the patient with a visual or auditory disorder

Discuss the unexpected response to therapy for the patient with a visual or auditory disorder

1345-1400:

Break

1400-1500:

Discuss the drugs used to treat visual and auditory disorders.

Discuss the care of the older patient with visual and auditory disorders.

Discuss the recommended diet therapy for patients with visual and auditory disorders.

Apply critical thinking to the treatment of a patient with visual and auditory disorders.

Vocational Nursing Program Lesson Plan

INSTRUCTOR: _____

DATE: _____ TOPIC: _____

Module IV: Week-1 Basic Concepts of Mental Health

Objectives/Competency	Content	Method of Instruction
<ol style="list-style-type: none"> 1. Define the key terms related to mental health. 2. Discuss the mental health/illness concepts 3. Describe the mental health continuum 4. Identify defining characteristics of people who are mentally healthy and those who are mentally ill. 5. Define the parts of personality 6. Define the factors that influence an individual's response to change. 7. Identify factors that contribute to the development of emotional problems or mental illness. 8. Identify barriers to health adaptation. 9. Identify sources of stress and discuss coping mechanisms. 10. Explain how stress can be managed 11. Identify stages of illness behavior. 12. Identify major components of a nursing assessment that focus on mental health status. 13. Identify basic nursing interventions for those experiencing illness or crisis. 	<p><u>0830-1015:</u> Mental Health/Illness concepts Mental Health continuum</p>	<p>Lecture Discussion Audio/Visual aids</p>
	<p><u>1015-1030:</u> Break</p>	<p>Training Aides & Handouts</p>
	<p><u>1030-1200:</u> Characteristics Personality Response to change</p>	<p>Study Guide: FON Chapter 34, pgs 279-289</p>
	<p><u>1200-1245:</u> Lunch</p>	<p>Power point notes pages</p>
	<p><u>1245-1345:</u> Emotional problems Stress and coping mechanisms Stress management</p>	<p>Evaluation Methods Role playing Critical thinking assessment Instructor observation Case studies Testing</p>
	<p><u>1400-1500:</u> Stages of illness behavior assessment Illness or crisis interventions Barriers to mental health</p>	<p>Assignments Study guide FON- Ch. 34</p>
		<p>FON. Chapter 34, pgs 1126-1138</p>

Vocational Nursing Program

Text Books

Name	Author	Edition
Foundations and Adult Health Nursing	Christensen Kockcrow	6th Edition, 2011 Mosby ISBN:9780323057288
Structure & Function of the Body	Thibodeau Patton	13th Edition, 2007 Mosby ISBN:9780323049917
Calculate with Confidence	Gray Morris	5th Edition 2010 Mosby ISBN:9780323056298
Mosby's Drug Guide for Nurses	Skidmore-Roth	8th Edition 2010 Mosby ISBN:9780323067034
Saunders Comprehensive Review for the NCLEX-PN Examination	Silvestri	4th Edition 2010 Saunders ISBN:9781416047308

ATTENDANCE

To maintain satisfactory attendance, students may not be absent for more than 10 percent of designated class time. Attendance will be monitored on a continuous basis and calculated monthly. Students not meeting 90 percent of attendance during any given month will be placed on attendance probation for no more than 30 days. Students on probation must maintain 90 percent attendance during their probation period or be subject to withdrawal.

Students who have been absent from classes for ten (10) consecutive school days will also be dropped from the training program unless prior approval has been granted. Special consideration will be given to students with extenuating circumstances such as illness, death, or birth in the immediate family, and other valid reasons substantiated in writing and at the discretion of the School Director.

ATTENDANCE PROBATION

Students not meeting attendance guidelines will be notified in writing when they are placed on probation and informed of the steps necessary to be removed from probationary status. Students will also receive attendance advising from the Program Director when they are placed on probation. The institution will notify a student by certified mail if he or she is being administratively terminated for unsatisfactory attendance.

TARDINESS

CBD College standards consider a student late if he/she arrives fifteen (15) minutes after the class starts for Theory or within fifteen (15) minutes for Clinical/Externship.

Students arriving late for classes will receive a Tardy in their records. Students returning back from breaks late will be also considered late and receive a Tardy. Students leaving the classroom early will be under the same policy as late students and will receive a Tardy. Three (3) Tardies in a month will be counted as one absence.

Students with three (3) Theory Tardies and/or three (3) Clinical Tardies in a month will be placed on Attendance Probation for 30 days and/or until the end of the Module. During the probation period the student will not be allowed to have any further Tardies or will be subject to termination.

LEAVE OF ABSENCE

Occasionally, circumstances arise that require students to interrupt their training. Depending on the situation and length of time, students may be granted a leave of absence. Students who find it necessary to take a leave of absence must submit a written request to the Records Officer and/or the Director.

A student must request the leave of absence in writing in advance of the beginning date of the leave of absence, unless unforeseen circumstances prevent the student from doing so. If a student does not request a leave of absence within a timeframe (10 consecutive days) consistent with the institution's consecutive absence policy, he or she will be withdrawn.

The written request must outline the circumstances and duration of the leave. The reason must be specified in order for the institution to have a reasonable expectation of the student's return within the timeframe of the leave of absence as requested. The student must sign and date the leave of absence request. The student must attest to understanding the procedures and implications for returning or failing to return to his/her course of study.

A leave of absence may not exceed 180 calendar days in any 12 month period or 50% of the length of the program, whichever is less. Multiple leaves of absence may be permitted provided the total of the leaves does not exceed this limit.

An approved leave of absence may be extended for an additional period of time provided that the extension request meets all of the above requirements, and the total length of the leave of absence does not exceed the specified limit.

The College does not assess the student any additional charges as a result of the leave of absence.

MAKE-UP WORK

Students are responsible for all work missed as a result of an absence. Make-up work will be scheduled and arranged between the student and the instructor, and should be completed within two (2) weeks or before the end of the course/module, whichever occurs first.

PLAN FOR IMPROVEMENT

A Plan for improvement will be provided for students not achieving the minimum pass score in any given test, except for the courses final tests (Module Tests).

The theory instructor will identify the areas needing improvement and will develop a plan and the steps to be followed, allowing the students, if applicable, to retake the failed test, under the retake policy conditions, observing the timeframe of 2 weeks of the failed/missed test, or until the last day of the course/module, whichever occurs first.

REMEDATION PLAN

The remediation plan is an intensive intervention to help students with failing average scores to bring their GPA to the minimum required to pass the course. This plan is developed by the theory instructor and may include tutoring sessions, research projects and other didactic methodologies applicable to address the problem.



Instructor Evaluation

AC CET Document 19

Date Developed: January 1988

Date Revised: August 2006, April 2011

Pages: 1 of 1

Pertinent to: All institutions

Institution: _____ City/State: _____

Instructor: _____ Program/Course: _____

Reviewer: _____ Date: _____ Time: _____

Evaluation based on the scale of 1 to 5 for how well the Instructor meets the criteria outlined below.

	Far Below 1	Below 2	Meets 3	Exceeds 4	Far Exceeds 5	Not Observed N/O
1. Instructor demonstrates expert knowledge of subject, including explanatory examples, with accurate and expansive information beyond the textbook.	<input type="checkbox"/>					
2. Learning objectives are outlined in lesson plans or syllabi and clearly connected to the lesson being taught.	<input type="checkbox"/>					
3. Class is well organized, with an introductory overview at the beginning and a logical linkage and sequence to the topics.	<input type="checkbox"/>					
4. Instructor uses relevant examples that support the concept, including the teaching points with highlighted applications and connections to other concepts.	<input type="checkbox"/>					
5. Instructor uses a variety of approaches to address multiple learning styles and provides appropriate supervision during practice activities.	<input type="checkbox"/>					
6. Instructor demonstrates a student-centered focus, including use of effective error correction, active listening, coaching, and facilitation of discussion.	<input type="checkbox"/>					
7. Instructor encourages student involvement in class, including questions that encourage participation, activities that engage students, and methods for checking for student understanding.	<input type="checkbox"/>					
8. Instructor uses a variety of visual aids to enhance presentations (e.g. charts, props, pictures, etc.).	<input type="checkbox"/>					
9. Instructor's pronunciation is clear and understandable.	<input type="checkbox"/>					
10. Instructor uses verbal content consistent with the focus of training, including proper grammar, word selection, and usage.	<input type="checkbox"/>					

Comments: _____

Reviewer's Signature: _____

Faculty Classroom Observation Form

Directions: This form is intended primarily as a checklist, not a scaled rating form. Reviews should indicate the presence of teaching activities/behaviors already established as indicative of effective teaching. Use NA if an item is not relevant for this class or for this instructor. To accommodate the diversity of pedagogical practices, criteria may be added with the approval of the dean for that program/discipline.

Although the observation can be used as a checklist, the observer may elect to provide a general rating for each subset of teaching practices using either a numeric or descriptive rating. Please keep in mind that the observation reflects a **"snapshot"** of teaching and is not intended as a representation of overall teaching practices. If the observer elects to provide a general rating for each subset, the following guidelines are suggested:

N - Needs Improvement P - Proficient A - Advanced E - Exemplary NA - Not Applicable

With numeric ratings, the intent is that each subset of teaching practices stands alone. There is no overall rating given to the instructor at the end of the observation form.

- When used with full-time faculty, the observation summary could be one piece of documentation used in the annual performance evaluation (PDP). It could be used by either the instructor to support Advanced or Exemplary ratings or by the Division Director to support Needs Improvement ratings.
- Division Directors, Discipline/Program Chairs, or their designees should check to make sure that the course has been approved for the online information systems and is available electronically for students. The course should include the core competency.
- The process will be expedited if observer familiarizes him/herself with the form ahead of time.
- Observer is not required to complete narrative section following each category of teaching practices. This section can be used when needed to help illustrate a concern, an exceptional teaching behavior, or general trends noticed during the observation.
- A copy of both the Classroom Observation Form and the Teaching Self-Assessment will be given to both the observer and the instructor.
- A review with instructor should be conducted as soon as possible after observation.

Instructor _____

Date _____

Course Prefix and Number _____

Course Title _____

Number of Students _____

Observer _____

Online Syllabus Posted _____

<i>Check if Observed</i>	Variety and Pacing of Instruction	Rating <input type="checkbox"/>
	Uses a variety of instructional methods	
	Allows adequate wait time when asking questions	
	Responds to wrong answers constructively	
	Draws non-participating students into activities/discussion	
	Prevents specific students from dominating activities/discussion	
	Asks probing questions when student answers are incomplete	
	Guides the direction of the discussion	
	Refrains from answering own questions	
	Mediates conflict or differences of opinions	
	Uses active learning strategies (group work, paired discussions, polling)	
	Provides explicit directions for active learning tasks (e.g. rationale, duration, product)	
	Allows sufficient time to complete in-class assignments	
	Specifies how learning tasks will be evaluated (if appropriate)	
	Provides opportunities for students to practice what they have learned	

Examples of instructor actions or behaviors that demonstrate above.

<i>Check if Observed</i>	Organization	Rating <input type="checkbox"/>
	Begins and ends class on time	
	Relates this and previous class(es), or provides students with opportunity to do so	
	Provides and follows an outline or organization for the class session	
	Has all necessary materials and equipment readily available	
	Uses effective transitions between class topics	
	Conveys the purpose of each class activity or assignment	
	Completes the scheduled topics	
	Summarizes periodically throughout and at end of class or prompts students to do so	
	Takes attendance throughout the semester	

Examples of instructor actions or behaviors that demonstrate above.

<i>Check if Observed</i>	Presentation Skills	Rating
	Communicates audibly and clearly	
	Establishes and maintains eye contact with students	
	Varies pace and tone to keep students alert	
	Uses a presentation style that facilitates note-taking	
	Uses positive and appropriate humor	
	Incorporates various instructional supports (film, diagrams)	
	Responds to changes in student attentiveness	
	Handouts are easy to follow	

Examples of instructor actions or behaviors that demonstrate above.

<i>Check if Observed</i>	Clarity	Rating
	Notes and explains new terms or concepts	
	Elaborates or repeats complex information	
	Uses examples to explain content	
	Makes explicit statements drawing student attention to key ideas	
	Pauses during explanations to ask and answer questions	
	Relates new ideas to familiar concepts	

Examples of instructor actions or behaviors that demonstrate above.

<i>Check if Observed</i>	Content Knowledge	Rating <input type="text"/>
	Makes accurate statements according to discipline standards	
	Incorporates current research in the field	
	Cites authorities to support statements	
	Presents divergent viewpoints	
	Makes distinctions between fact and opinion	
	Communicates the reasoning process behind operations and/or concepts	

Examples of instructor actions or behaviors that demonstrate above.

<i>Check if Observed</i>	Instructor-Student Interaction	Rating <input type="text"/>
	Attends respectfully to student comprehension or puzzlement	
	Asks questions of students that challenge them to think more deeply	
	Invites student participation and comments	
	Incorporates student responses when appropriate	
	Encourages students to respond to their peers throughout the discussions	
	Treats students with respect	
	Uses positive reinforcement to encourage student participation and intellectual risk-taking	
	Encourages students to interact civilly/respectfully with each other	
	Addresses potentially disruptive behaviors before they impact learning environment	

Examples of instructor actions or behaviors that demonstrate above.

<i>Check if Observed</i>	Use of Technology	Rating
	Effectively incorporates a variety of instructional technologies to enhance student learning (PPT, websites, YouTube, blogs, etc.)	
	Uses Bb or Moodle to provide supplemental materials	

Examples of instructor actions or behaviors that demonstrate above.

<i>Check if Observed</i>	Discipline/Program Specific Teaching Behaviors	Rating
	Example: Uses contextualized learning to help make content relevant for students	

Examples of instructor actions or behaviors that demonstrate above.

What went well in this class?

What suggestions for improvement do you have?

Follow-up:

VOCATIONAL NURSING PROGRAM

Evaluation of Clinical Site by Program Director/Instructor

Course: _____

Unit/floors utilized: _____

Dates of course: _____

Place a ✓ in the appropriate space following each statement:

		Strongly Disagree	Disagree	N/A	Agree	Strongly Agree
		1	2	3	4	5
1.	Resources are available, accessible and appropriate					
2.	Setting fulfills clinical course objectives					
3.	Environment is conducive to learning					
4.	Principles of safe patient practice are observed					
5.	Professional role models are present					
6.	Staff exhibits professional behavior/dressed properly					
7.	Staff wears visible name tags/badges					
8.	Paraprofessional staff is helpful to students					
9.	Staff exhibits caring attitude to patients					
10.	Other health members are willing to work with students					
11.	The agency presents a professional appearance at first glance					
12.	Staff members are polite and knowledgeable					
13.	Extern site has current (up to date) equipment					
14.	Skills learned in school are/will be well applied during this externsh					
15.	Students are taught how to use the equipments properly					
16.	Students' duties are explained properly					
17.	Students have the opportunity to interact with patients					

EVALUATION/PROGRESSION POLICY

Graduation Requirements

Program Certificates of Completion are awarded to students who complete all course work with a minimum of 80 percent grade point average and the required total number of hours (1560/2145) of the program, in no more than 150% of the total number of hours in the program.

Student's Evaluation

Student evaluations consist of monitoring student progress in theory, campus laboratory and the clinical hospital rotations on a continuing basis, and assessing students on the attainment of the objectives listed in the courses syllabi.

Basis for Theory Grading

Instructors record theory grades for each student using 100 Percent Grading Scale, as follows: GRADE PERCENT	GRADE	DESCRIPTION	POINT
90 - 100	A	Excellent	4.0
85 - 89	B	Good	3.0
80 - 84	C	Satisfactory	2.0
75 - 79	D	Unsatisfactory	1.0
0 - 74	F	Fail	0.0
	I	Incomplete	0.0
	W	Withdrawal	***

Continued Evaluation

Student scores are continuously monitored. Students failing any of the theory exams in the program are required to meet with the respective instructor, who will develop a plan ("plan for improvement") indicating the areas needing improvement and the steps to be followed, allowing them, if applicable, to retake the failed exam (see retake policy for more details).

If during any given month or 4 course tests (whichever is greater) the average score for a student is below 80%, the student will be placed on probation for no longer than 30 days and will have to comply with an individual remediation plan to optimize future scores.

Students who do not maintain the minimum pass score during a Module will be placed on probation. Failure in achieving the minimum pass score at the end of a Module may result in repetition of the Module or termination from the program.

Successful completion of the Module

Successful completion of the module requires the combination of all of the following:

- Module Average equal or above 80%;
- “Pass” evaluation on the clinical area; and
- Completion of all theory and clinical hours.

Module Averages

The Module Average will be obtained by the average of all the tests taken in the Module (**40%**), average of all homework in the Module (**10%**), Module Test (**25%**) and ATI Test (**25%**). CBD College utilizes a computerized system of tests – Comprehensive Assessment and Review Program - provided by ATI Testing to monitor students' progress.

Module and ATI Tests cannot be retaken.

If the result of the Module Average is lower than 80%, the student will be terminated from the program or will be permitted to repeat the Module. Only one repetition of a module is allowed per program.

THEORY TESTING PROCEDURES

STUDENTS ARE REQUIRED TO TAKE ALL THE EXAMS LISTED IN THE SYLLABUS. IT IS NOT PERMITTED TO SKIP ANY TESTS.

Testing Environment

CBD students are expected to take their tests with ethics and integrity principles.

Any kind of communication, in any kind of language, is an example of academic dishonesty.

Students found cheating or in any means of academic dishonesty would be at risk of immediate termination.

Any questions relative to clarification of test instructions are to be directed to the instructor, not other students before the actual test starts. In this case, when the student has a question he/she will raise his/her hand and wait for the instructor to acknowledge him/her.

General testing procedures

1. Prior to beginning a test, all students' possessions, except for pen/pencil must be placed under his/her chair.
2. Students **MUST** turn cell phones off.
3. Once the test is in process of being handed out:
 - a) No talking or any other type of communication will be allowed;
 - b) Students will not be permitted to leave the room and come back to resume the exam (at the discretion of the instructor).

A student found violating any of these general testing procedures or exercising any practice that qualifies as academic dishonesty will have the test taken away, the student will be required to leave the test room, and the test will be graded as is, with no opportunity to be retaken.

Tardy Students will not be allowed to enter the room, and will be under the retake policy for that test.

Students absent for a test will be automatically under the retake policy.

Review of Tests/Assignments

Tests and assignments will be reviewed with the instructor after all of the students in the program have taken them. Notations may not be made during the review.

Retake Policy

The retake policy limits students retaking an exam to earn a maximum of the minimum pass score established for the course. In case the student fails the retake, scores on the first attempt (if applicable) and on the retake will be compared and the higher score will be recorded.

This policy applies both to students who miss a test for any reason and to those who fail a test.

Students will have 1 opportunity to retake a test, within 2 weeks of the failed/missed test, or until the last day of the course/module, whichever occurs first.

The number of retakes in Modules I is limited to 3 and the number of retakes in Modules II, III, and IV is 2 per Module.

FINAL COURSE TESTS (MODULE TESTS) CANNOT BE RETAKEN.

Plan for improvement

A Plan for improvement will be provided for students not achieving the minimum pass score in any given test, except for the courses final tests (Module Tests).

The theory instructor will identify the areas needing improvement and will develop a plan and the steps to be followed, allowing the students, if applicable, to retake the failed test, under the retake policy conditions, observing the timeframe of 2 weeks of the failed/missed test, or until the last day of the course/module, whichever occurs first.

Remediation Plan

The remediation plan is an intensive intervention to help students with failing average scores to bring their GPA to the minimum required to pass the course. This plan is developed by the theory instructor and may include tutoring sessions, research projects and other didactic methodologies applicable to address the problem.

ACADEMIC PROBATION

Students not reaching the minimum pass score average at any given month during a Module will be placed on probation and will be required to follow the Remediation Plan individually created to optimize the area(s) that brought student to probation. The probation period lasts for up to 30 days, but may be extended at the Program Director's discretion. Under no circumstances it will exceed the last day of the Module.

At the estimated end date of the probation period, if the student has achieved the minimum pass score, he/she will be off probation, and will be allowed to continue the course of studies.

Failure in achieving the minimum pass score at the end of the probation period may result in immediate termination from the program.

CLINICAL EVALUATION METHOD

Each fifteen-week module has specific clinical objectives that must be met in order for the student to move on to the next module.

Students are evaluated in the clinical areas using a “Pass”/”Fail” designation, based upon successful completion of the clinical objectives. Failure in achieving those clinical objectives may result in repetition of the respective Module.

All students will receive a “mid–module” and a final evaluation at the end of each clinical rotation experience.

Students failing to meet performance criteria at the mid-module evaluation meet with the instructor and/or director of the program and receive a plan for improvement which may include but is not limited to:

1. Special assignments in the content area
2. Individual/group tutorial in the campus skills lab
3. Additional clinical days

At the final evaluation, the student must obtain a pass grade in each clinical objective. Students failing any of the clinical objectives will be required to repeat the Module.

PROBATION

Students can be placed on probation due to unsatisfactory grades, attendance, excessive tardiness, behavior, and failure to comply with CBD College’s code of conduct and rules contained in this Handbook.

REPETITION OF A MODULE

If a student fails to achieve the minimum pass score at the end of Module, he/she will be subject to termination or will be allowed to repeat the Module, at his/her own expense.³

As the vocational nursing modules contain 2 courses each (Theory and Clinical), students failing any of these 2 components will be required to repeat both, even if one of them has been successfully completed.

In this case, the student will be joining another Group of students, at the point they reach the beginning of the Module to be repeated. If the student passes the Module, he/she may continue the Program with the same Group they have repeated the Module.

A student may repeat only one module in the Vocational Nursing Program.

³ Please see the financial aid officer if you have any questions regarding this policy.

Vocational Nursing Program-Module II
Medical/Surgical Nursing Clinical Evaluation

Date of Evaluation: _____

Student Name: _____ VN Group # _____ Clinical Team# _____

Criterion for Vocational Nursing Student Evaluation

- The Vocational nursing students will demonstrate satisfactory performance in all five (5) evaluation areas at the time of the final evaluation in order to successfully pass the clinical portion of the module.
- The Evaluation process is based on the ability of the Vocational nursing student to demonstrate knowledge and apply nursing skills specific to the Medical/Surgical Nursing module.
- Unsatisfactory performance in any of the five (5) evaluation areas at the time of the final evaluation will result in failure of the clinical module.
- Unsafe clinical behavior at any time during the clinical module will result in immediate suspension from the clinical site, open an investigation of the situation and possibly result in disciplinary action up to and including termination from the vocational nursing program.

Evaluation area #1: Clinical Safety-the Vocational Nursing student will demonstrate knowledge of basic clinical safety as well demonstrate nursing skills specific to the care of the Medical/Surgical patient.

Evaluation Objectives	Mid Point Assessment	Final Evaluation	Satisfactory	Needs Improvement	Unsatisfactory
	Date of Assessment	Date of Evaluation	Yes or No	Yes or No: concise statement of behavior that needs to change	Yes or No
1.1: Identifies patient with ID band before administrating nursing care.					
1.2: Consistently practices standard precautions for infection control: Hand washing.					
1.3: Uses principles of body mechanics to transfer, position and ambulate patients.					
1.4: Identified emergency evacuation process for clinical area. Aware of location and use of fire extinguisher.					

Evaluation Objectives	Mid Point Assessment	Final Evaluation	Satisfactory	Needs Improvement	Unsatisfactory
	Date of Assessment	Date of Evaluation	Yes or No	Yes or No: concise statement of behavior that needs to change	Yes or No
1.5: Aware of location and use of Crash Cart.					
1.6: Consistently places call light within reach of the patient.					
1.7: Able to identify and articulate nursing care needs of the Medical/Surgical patient.					
1.8: Able to identify interventions within the LVN scope of practice.					
1.9: Able to plan and prioritize the care of Medical/Surgical patients using the nursing process.					
1.10: Performs daily patient health assessments per facility protocol.					

Comments: _____

Evaluation area #2: Communication-the Vocational Nursing student will demonstrate the ability to effectively and efficiently communicate to patients, families, clinical instructor and clinical agency staff. Using the nursing process, the Vocational Nursing student will be able to clearly and concisely gather and express the nursing care needs of the Medical/ Surgical patient.

Evaluation Objectives	Mid Point Assessment	Final Evaluation	Satisfactory	Needs Improvement	Unsatisfactory
	Date of Assessment	Date of Evaluation	Yes or No	Yes or No: concise statement of behavior that needs to change	Yes or No
2.1: Maintains confidentiality of patient information					
2.2: Demonstrate knowledge of Pt. data according to HIPPA regulations					
2.3: Demonstrates the ability to understand instructions given by clinical instructor and agency staff regarding Medical/ Surgical nursing care.					
2.4: Communicates verbal/written information from Medical/Surgical patient assessment.					
2.5: Communicates clearly and concisely (verbal/written) to members of the health care team.					
2.6: Demonstrates understanding of written information related to Medical/Surgical nursing care.					
2.7: Demonstrates ability to communicate with Medical/Surgical patients in a therapeutic manner.					
2.8: Demonstrates the ability to receive constructive criticism and make improvement in identified areas.					

Comments: _____

Evaluation Area #3: Accountability- the Vocational Nursing student will demonstrate behaviors of accountability, dependability and commitment as integral parts of providing care to the Medical/Surgical patient.

Evaluation Objectives	Mid Point Assessment	Final Evaluation	Satisfactory	Needs Improvement	Unsatisfactory
	Date of Assessment	Date of Evaluation	Yes or No	Yes or No: concise statement of behavior that needs to change	Yes or No
3.1: Prepares and submits all clinical work as assigned.					
3.2: Arrives on time to clinical agency, following CBD college policy of attendance					
3.3: Takes and returns from breaks/ lunch at assigned times.					
3.4: Seeks out supervision when faced with new experiences.					
3.5: Demonstrates ability to identify and report appropriate pt. data to RN/MD					
3.6: Demonstrates ability to delegate and oversee patient care to appropriate members of the health team.					
3.7: Provides complete report to Clinical Instructor/Charge Nurse before leaving unit.					
3.8: Reports unusual occurrences to instructor/charge nurse.					

Comments:

Evaluation Area #4: Professional Appearance- the Vocational Nursing student will maintain a clean, professional appearance at all times.

Evaluation Objectives	Mid Point Assessment	Final Evaluation	Satisfactory	Needs Improvement	Unsatisfactory
	Date of Assessment	Date of Evaluation	Yes or No	Yes or No: concise statement of behavior that needs to change	Yes or No
4.1: Complies with agency policies and procedures, complies with school dress code.					
4.2: Keeps hair off collar, nails clean and short (no artificial nails).					
4.3: Maintains clean uniform and shoes. Maintains appropriate personal hygiene and refrains from overuse of perfume.					
4.4: Wears name badge at all times while on clinical site.					
4.5: Wears cosmetics and jewelry as appropriate for clinical site, in accordance with CBD dress code.					
4.6: Demonstrates understanding of written information related to Medical/Surgical nursing care.					

Comments:

Evaluation Area #5: Organization-the Vocational Nursing student will demonstrate basic organizations skills, ability to prioritize and complete task in a timely manner.

Evaluation Objectives	Mid Point Assessment	Final Evaluation	Satisfactory	Needs Improvement	Unsatisfactory
	Date of Assessment	Date of Evaluation	Yes or No	Yes or No: concise statement of behavior that needs to change	Yes or No
5.1: Attends all clinical sessions prepared for work: stethoscope, black pen, and notebook.					
5.2: Sets priorities for nursing care to be given during shift.					
5.3: Demonstrates the use of the nursing process when planning pt. care.					
5.4: Prepares/sets up in advance for pt. procedures.					

Comments: _____

Overall Impression _____

Instructor Signature: _____ Student Signature: _____

VOCATIONAL NURSING PROGRAM CLINICAL PRACTICE COMPETENCY CHECKLIST

Purpose: These are the performance standards required for successful completion of the Vocational Nursing program at CBD College. Each student must demonstrate proficiency and comprehension of the below nursing competencies in order to successfully complete the VN Program.

To achieve successful completion of the VN Program, all nursing skills competencies must be evidenced by one of the following methods:

- A. Demonstration/Direct Observation in clinical setting
- B. Video Review facilitated by instructor
- C. Skills Lab

Student Name: _____

Competency Area	Initial Date:	Proficient Date:	Instructor Signature	Comment
Infection Control				
Hand washing				
Standard Precautions				
Clean Gloving				
Sterile Gloving				
Sharps Disposal				
Disposal: Contaminated materials (double bagging)				
PPE Use: gowning, masking, eye gear				
Isolation Techniques: Precautions				
Sterile Technique/Sterile Field				
Patient positioning, mobility and safety				
ID and allergy bands				
Body mechanics				
Body alignment				
Turning patients				
Transferring patients:				
*bed to stretcher				
*bed to chair				
*chair to bed				
Use of Safety reminder devices				
Use of restraints				
Active Range of Motion				
Passive Range of Motion				
Patient positioning, mobility and safety (cont)				
Ambulation				
Transporting patient				
Use of wheelchair				
Use of crutches				
Use of cane				
Use of walker				
Post-Mortum Care				

Competency Area	Initial Date:	Proficient Date:	Instructor Signature	Comment
Patient Comfort/Bed-making				
Occupied bed				
Unoccupied bed				
Back Rub				
Call light use				
Assist w/patient feeding				
Patient Hygiene				
Bed bath				
Partial bed bath				
Tub bath				
Oral care				
Care of dentures				
Hair care/Shampooing				
Shaving				
Nail care: fingers and toes				
Foot care				
Care of prosthetics				
Facial Care: eye, ear, nose				
Use of Bedpan				
Use of urinal				
Use of Bedside Commode				
Incontinence care				
Vital Signs				
Respiration: rate and quality				
Pulse rate and quality				
*carotid				
*brachial				
*ulnar				
*radial				
*apical				
*femoral				
*popliteal				
*posterior tibia				
*pedal				
Blood pressure: manual and electronic				
Temperature:				
*axilla				
*oral				
*rectal				
*tympanic				
Pain assesement				
Nurse Physical Assessment: Adult				
Methods of assessment:				
*inspection				
*auscultation				
*palpation				
*percussion				
Components of Nursing Health History				
Sequence of Head to Toe				

Competency Area	Initial Date:	Proficient Date:	Instructor Signature	Comment
Assessment				
Focused Assessment				
Review of Systems				
*Eyes				
*Ears, Nose, Throat				
*Respiratory				
*Circulatory				
*Endocrine				
*Gastrointestinal				
*Elimination				
*Urinary				
*Neurological				
*Skin				
*Musculoskeletal				
*Reproductive				
Communication				
Change of shift report				
Patient admission, transfer, discharge				
Nursing Documentation				
*narrative notes				
*SOAPE				
*PIE				
*flow sheets				
<u>Intake/Output</u>				
Patient/Family teaching				
*Pre-op				
*Post-op				
Genitourinary				
Indwelling catheter insertion				
Indwelling catheter removal				
Straight catheter insertion/removal				
Catheter irrigation				
Catheter Care				
Perineal Care				
Set-up/assist with PAP Smear				
Set-up/assist with Pelvic Examination-				
Bowel Elimination				
Assessment and removal of impaction				
Enema				
Colostomy Care				
*peristomal skin care				
*application of ostomy appliance				
*Ostomy irrigation				
*Pouch care				
Enteral Feeding				
Gastrostomy tube care				

Competency Area	Initial Date:	Proficient Date:	Instructor Signature	Comment
NG Tube Care: insertion /removal				
Use of feeding pumps.				
Gravity feeding: NG tube and G-tube				
Assessing residual				
Wound Management				
Clean dressing change				
Wet to dry dressing change				
Sterile dressing change				
Wound irrigation				
Deep Wound packing				
Assess/maintain drainage devices: Hemovacs, JP drains.				
Specimen Collection				
Sputum collection				
Stool collection				
*fecal occult blood				
*ova and parasite				
Gastric juice collection (gastrocult)				
Capillary blood glucose testing				
*prep for fingerstick				
* collection of sample				
*calibration of glucose testing device				
Urine collection:				
*midstream				
* sterile via catheter port				
* sterile via straight catheterization				
* 24 hour urine collection				
Respiratory Care				
Pulse oximeters				
Nebulizer				
Ambu bag/mask				
Oxygen administration:				
*nasal cannula				
*mask				
Turn, Cough Deep Breath				
Incentive spirometry				
Closed chest tube drainage system care.				
Tracheostomy Care				
Suctioning:				
*Oropharyngeal				
*Nasopharyngeal				
Cardiovascular Care				
Use of Doppler				
Application of anti-embolic stockings				
Assess and grade edema				

Competency Area	Initial Date:	Proficient Date:	Instructor Signature	Comment
Assess and grade capillary refill				
Orthopedic Care				
Traction care				
Cast care				
Use of Abduction pillow				
Prosthesis/Amputation Care				
Hot and cold application				
Medication Administration				
Six rights of medication administration				
Dosage Calculation				
Reading labels on medication container.				
Reconstituting powder meds				
Preparing meds from vial/ampule				
Documenting and reporting medication errors				
Administer:				
Oral medication				
Topical				
Eye drops				
Eye ointment				
Ear drops				
Nasal spray				
Suppositories				
Injections:				
*intradermal				
*subcutaneous				
*intramuscular				
*Z-track				
Mental Health				
Mental status Examination				
Therapeutic Communication Skills				
Evaluate risk for suicide				
Evaluate risk for violence				
Maternal Child Health				
Obstetrical Assessment				
Auscultation of fetal rate with Doppler				
Measurement of fundal height				
Basic interpretation of NST record				
Assess contractions				
Comfort measures for labor contractions				
Assist with positions to promote maternal pushing				
Post-partum assessment				
Fundal Tone				
Assess Breast for engorgement				

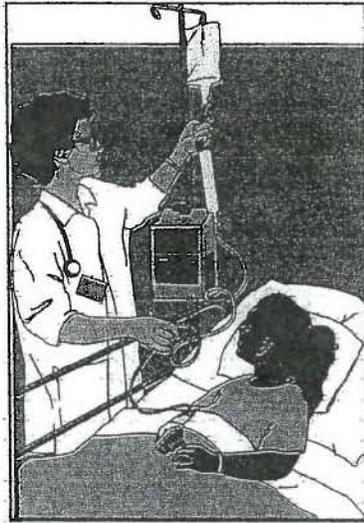
Competency Area	Initial Date:	Proficient Date:	Instructor Signature	Comment
Lochia flow				
Breastfeeding support and education.				
Newborn Assessment				
Head to Toe Assessment				
Vital signs				
Weight and length measurement				
Head and Chest Circumference				
Classification of growth and gestational age				
Newborn Testing:				
*Heel Stick- PKU				
*Eye prophylaxis				
*Vitamin K injection				
*Hep B vaccine				
*Neurological Function				
- Moro				
-Grasp				
-Suck				
-Babinski				
Pediatric Assessment				
Height and weight measurement				
Use and interpretation of growth chart				
Developmental Milestone Assessment				
Medication calculations for Pediatric patients				
Scoliosis screening				

EXAMPLES

- Student clinical assessment process – Orthopedic Medical Center
 - Student clinical assessment process – Kaiser Permanente
 - Pilot of in-class and homework assignments

ORTHO URGENT CARE MEDICAL GROUP, INC

EXTERNSHIP PROGRAM



Notes:

Orthopaedic Medical Center
URGENT CARE

Joann Harold, RN, BSN
Clinical Service Coordinator

2400 South Flower St. ■ Los Angeles ■ California 90007
Telephone: (213) 742-1171 ■ FAX: (213) 742-1512

**Community Based Education & Development (CBD College)
Vocational Nursing Program**

Orthopaedic Urgent Care Pediatric Clinical Orientation Plan

NURSING INSTRUCTOR/STUDENT CLINIC ORIENTATION CHECKLIST

The orientation program is planned to familiarize the affiliating nursing instructor and student nurse with the philosophy, policies/ procedures, and requirements specific to this clinical nursing service and the care of the specific needs of patients.

Date of Completion

A. Meeting with the Director of Nursing _____

B. Orientation to the assigned areas with the
Director of Nursing or assigned nursing staff. _____

These specific areas must be addressed with the nursing instructor and the student nurse:

- Unit physical layout and nursing staff
- Unit routines
- Patient assignment method
- Reporting system
- Patient flow through the clinic
- Medication procedures
- Communication / Patient relations
- Patient Identification system
- Chart forms and documentation on patient
- Medical records and patient care forms
- Answering of patient concerns
- Risk Prevention
- Emergency procedures/ codes
- Infection control
- Restraint protocol
- Pain Management Protocol
- Equipment & supplies
- Crash care and defibrillator

C. Contact Information exchange for Nursing Instructor and Director of Nursing, including resource information.

I HAVE COMPLETED THE ORIENTATION POROCESS:

DON/Nursing Staff representative Signature: _____ Date _____

Nursing Instructor Signature: _____ Date: _____

Vocational Nursing Student: _____ Date: _____

Ortho Urgent Care Medical Group, Inc

Externship Program

Policies and Procedures

1. Documenting accurately and completely on the E-1 is very important. When taking patients history be specific about details.
 - a. How did the injury happen?
 - b. What Happened ?
 - c. When did it happen?
 - d. Who referred the patient here?
 - e. This information is useful in determining what x-ray views and the number of x-ray views *should be ordered and whether or not the patient needs to be treated by the resident etc.*

2. Here are some documentation examples:
 - a. 1430- pt c/o falling off monkey bars at school today around 11:00; landed on RT wrist. Went to PMD, was referred here. C/o pain swelling, can't move wrist - Jsmith
 - b. 1545 -LLC applied by Jsmith , ACI given to parent by Rtoni

3. Once the patient is triaged, the RN is consulted for any x-ray orders. Once the determination is made the RN WRITES the order on the E-1. The person triaging may then write the x-ray request and submit to x-ray.

Note: If the RN is unavailable, the physician (s) is asked, and then a Sr. Cast Tech, if none of these are available, you may ask the X-Ray Tech. Some RN's like to monitor and order all the x-ray studies for every patient. Please work according to the working habits of the RN who is scheduled for that particular day.

4. During the course of the triage process the student is responsible for finding a nurse, or physician to obtain an order for an x-ray. If the patient presents with outside films, we will determine if further studies are needed.

5. Lower Extremity Fractures
 - a. These types of injuries are almost always quite painful. Be very careful when trying to weight these patients. If you know there is a fracture of lower extremity, talk with the RN or physician and see if you can be a little more creative in coming up with how to get an accurate weight.

6. Please make sure all patients are ready for an exam for the x-ray tech and / or doctor.
 - a. Cut splints off on all NON reduced injuries
 - b. Place patients with complaints of back pain, rib pain, physicals etc, in gowns.
 - c. If patient presents with tibia, knee or foot injury place the patient in a wheel chair.

7. Weight
 - a. All weights must be converted from lbs to kg
Note: Divide lbs by 2.2
Example: LBS/2.2.= KG

8. Whenever assisting female patients or parents, make sure they are not pregnant before taking to the x-ray room and obtain LMP date.
9. Inform the RN if patient injured themselves the same day as visit. Infant injuries, femur fx patients who are crying from pain and angulated fractures.
10. Most of the resident cases as well as some of our attending physicians require post casts. If you are unsure if a patient needs and x-ray prior to discharging, please ask one of the doctors or the RN. This is a crucial issue as these patients must be cleared by the resident before discharge. So remember if you discharge a patient before and x-ray is taken and the patient has not been cleared, you are accountable.
11. Follow all HIPPA regulations
 - a. Use only first or last name when calling patients into the triage room or bed. Once patient is inside and lobby door is closed confirm both first and last name.
 - b. When working or helping in the front office please do not discard any documents into the trash bin. Any document with any patient information must be shredded. If you are not aware of the location on the shredder bin please ask for assistance.
12. We only allow 1 parent or guardian in the back per patient. Parents are allowed to change places with each other; it gets too crowded when we have more than one adult in the bed with patient.
13. Break/ Lunch
 - a. Arrange any break or lunch with RN
 - b. You are allowed to take a 15 minute break and 30 minute lunch
Note: If you are only here 4 hours you are only allowed to take a 20 minute break.
14. It is not allowed to use cell phones or office phones for personal issues while on duty. If an emergency arises please inform someone in management or the RN for permission to use the phone.
15. Do not use blue pens, use black pens only
16. Students are not allowed to do cast checks
17. Timecard
 - a. It is your responsibility to clock in and out every day (except for lunch)
 - b. Please ask RN to show you how to use timecard on your first day
 - c. You must bring this timecard to JoAnn every Friday or Monday to get school timesheet signed off for the week.
18. School timesheets must be signed by RN. School evals must be completed and signed by JoAnn or Theresa
19. Schedule
 - a. If you are going to call in sick or late you must call management and the Urgent care to let the RN on schedule know your absence or tardy,

- b. If you need to go home early or granted permission to go home you must let JoAnn or the RN on staff know.
- c. Any schedule change must be notified to RN coordinator or Management immediately.
Note: Student will be dropped on third absent.

- 20. You must bring your portfolio everyday to work. This included any sheets that the school has provided to you.
- 21. If you will be driving to our facility it is necessary to obtain a parking pass. You may Theresa to assist you with signing our a parking pass. It is your responsibility to turn in the parking pass on the last day of your externship. Failure to do so will result in holding on to your timesheets and eval until turned in.
- 22. Students are not allowed to discharge any patients on their own until approved by JoAnn.
- 23. We do not have any orthopaedic doctors for adults in this facility, we only have orthopaedic doctors for children. We could take an adult patient x-ray he/she may have a consultation with our ER doctor, patient will be diagnosed but not treated.
- 24. Our hours of operation are from 7am to 11pm seven days a week. We always highly recommend for patients to try arriving to our Urgent Care department before 7 pm. Due to the fact that the resident leaves around 9 pm.
- 25. Along with working with the RN, students will also work with our "Flow Tech"; the flow tech is mainly responsible for patient flow. The flow tech is not in charge of students, but students must cooperate with any request that the flow tech might have.
- 26. You must meet with JoAnn once a week or at least every other week. Please schedule yourself to meet with JoAnn.
- 27. **Evaluation sheets** is one of your top priority, please make sure that they are completed by the due dates.
- 28. If any issue arises, If you have a question, concern or need to call JoAnn for any of the procedures listed above please call her via her cell phone number at any time.

1	Weekly Review
2	Evaluation Sheets
3	Policies and Procedures
4	Hands on Training
5	Patient Flow diagram
6	Memos / Update
7	Timecard

Community Based Education & Development (CBD College) Vocational Nursing Program

Orthopaedic Urgent Care Pediatric Clinical Objectives

This fourth semester clinical course is designed for the advanced vocational nursing student and included leadership skills with pediatric clinical nursing skills. Each student will be expected to clock in and clock out using the Orthopaedic Urgent Care Medical Group timecard provided by the Director of Nursing of this outpatient clinic. The clinical objectives are as follows depending upon student assignment within these clinical areas. All student interventions will be provided under the direct supervision of the staff RN or RN nursing instructor.

Triage:

Student will take vital signs and promptly report abnormal results to licensed nurse. Under direct supervision of the nursing staff students will complete a patient history and provide documentation on the treatment record.

Assistant to the Registered Nurse

Monitor and coordinate the patient triage process. Provide oral, subcutaneous and intramuscular injections medications as ordered by the physician. Assist the RN in patient preparation for conscious sedation procedures such as apply monitoring devices such as EKG leads, oxygen therapy, patient positioning and assist with IV fluid administration.

Assistant to the X-Ray Technician

Coordinate and monitor x-ray requisitions. Assist patient in and out of the x-ray room. Prepare patients for radiographic examinations.

Assistant to the Casting Technician

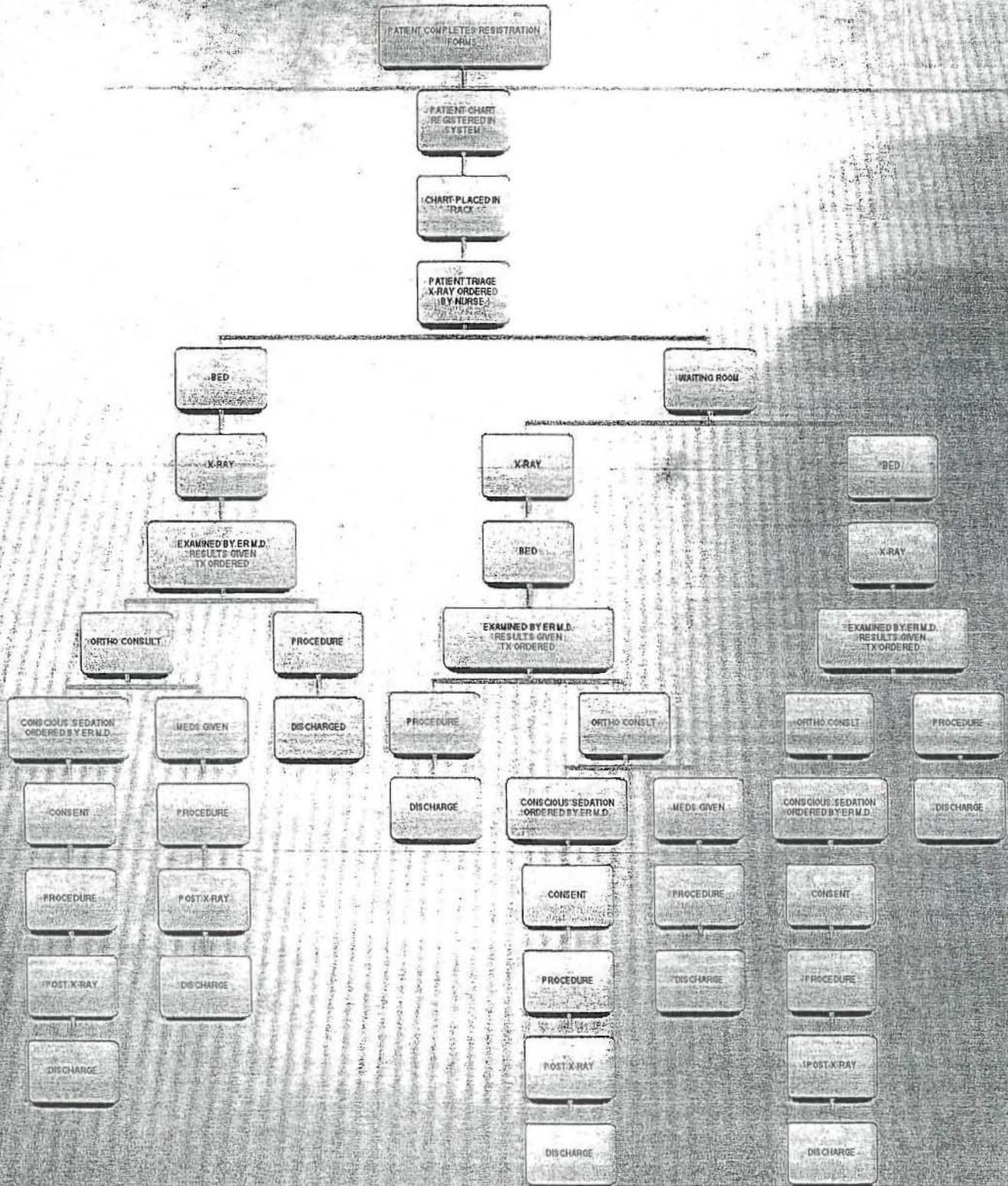
Review and give patients discharge instructions sheet. Teaching of cast care and when to notify the physician regarding unusual signs and symptoms. Provide patients with documentation related to school and or work restrictions. Observe and assist the cast technician during the application of casts on the patients. Assist with the replenishing of equipment and stocking of patient care items.

Assist Front Office

Logging patients in and out of the clinic. Collection and copying of medical insurance cards. Answering telephones and assisting in telephone triage for incoming patients. Assisting with aspects related to documentation and confidential medical records, and filing of these records. Completion of cast check list forms.

Students will also have opportunities to learn and assist with x-ray scanning, electrocardiogram (EKG) set-up and monitoring and Pre-Employment Drug Screening for adults.

PATIENT FLOW PROCESS



INFANT (BIRTH TO 1 YEAR)

Period of rapid motor, cognitive, and social development. The primary psychosocial task is to build a sense of safety, security, and trust in parents and other caregivers.

MOTOR DEVELOPMENT

- 1 MONTH—Cannot support head
- 2 MONTHS—Turns side to side
- 3 MONTHS—Smiles in response to stimuli
- 4 MONTHS—Picks objects, can put objects to mouth, rolls side to side
- 5 MONTHS—Turns from stomach to back
- 6 MONTHS—Sits unsupported, reaches with arms, turns completely over
- 7 MONTHS—Bangs objects on a table
- 8 MONTHS—Reaches toys out of reach, begins pincher grasp
- 9 MONTHS—Can squeeze, slide, push, pull, and rip; pulls self to standing position
- 10 MONTHS—Holds bottle by self, feeds self with finger foods
- 11 MONTHS—Walks with support
- 12 MONTHS—Walks alone, mature pincher grasp, 2 words plus Dada/Mama

PROMOTION OF GROWTH AND DEVELOPMENT

- ☺ Allow parents to remain with the infant as much as possible.
- ☺ If infant is crying, determine the cause for the cry rather than simply trying to stop the cry.
- ☺ Encourage parent to bring toys from home or provide toys that are colorful.

COMMUNICATION AND LANGUAGE

- ☺ Crying is the infant's first means of verbal communication.
- ☺ Other ways are by cooing, gurgling, and babbling.

FEARS

- ☺ Fear of strangers or stranger anxiety—appears between 6 and 8 months of age.

SAFETY

- ☺ Do not leave infant alone on changing tables, beds, sofas, or chairs.
- ☺ Keep side-rails up on cribs at all times unless you are administering care.
- ☺ Never leave small objects within a baby's reach even for a moment.
- ☺ Infants must be put in a car seat every time they are in a car.

NON-PHARMACOLOGICAL PAIN RELIEF TECHNIQUES

- ☺ Cannot verbalize pain, but research supports the presence of pain in even premature infants. Babies display pain through crying and through physiologic changes such as increased heart rate and increased breathing.
- ☺ Kinesthetic: Both during and after painful procedures, infants can benefit from tactile stimulation such as rocking, swaddling, patting, stroking, and massaging. Young infants are also comforted by sucking either a pacifier during a procedure or breast or bottle after.

TODDLER (1 TO 4 YEARS OF AGE)

More vulnerable to hospitalization than adults due to inability to tolerate separation from loved ones. Ability to understand reasons for hospitalization. Play is the most effective method to decrease their distress level. Characterized by negativism and tantrums, i.e. "Terrible twos". Main task is towards greater autonomy.

MOTOR DEVELOPMENT

15 MONTHS—Walks well alone

18 MONTHS—Runs, throws things, scribbles spontaneously, uses two-word combinations

24 MONTHS—Feeds self with spoon correctly, unscrews lid, turns doorknob, walks up and down stairs alone, helps dress and undress self

PROMOTION OF GROWTH AND DEVELOPMENT

- ☺ Allow parents to remain with the child as much as possible.
- ☺ Allow the child to help with procedures such as dressing removal.
- ☺ Provide toys including objects from the hospital environment for creative play.
- ☺ Speak and play with the toddler to reduce stress.
- ☺ Distract the toddler with games and toys.

COMMUNICATION AND LANGUAGE / COGNITION

- ☺ Toddler's favorite word is "NO".
- ☺ Can point to a body part upon request.
- ☺ Has capacity for basic reasoning, understands object permanence, has the beginnings of memory and an understanding of causality, is egocentric and begins to play "make believe".

SAFETY

- ☺ Needs to be watched carefully because of their mobility.
- ☺ Explore their surroundings by putting everything in their mouths.
- ☺ Safety caps must be on for all medicines and toxic products.
- ☺ Should never be left alone in or near a bathtub, pail of water, or any other volume of water for a moment. Children can drown in less than 2 inches of water.
- ☺ Use car safety seat each time the child rides in a car.

EDUCATION

- ☺ Play and simple instruction can be used to teach and gain the trust of the toddler. Important to repeat things often. **DO NOT LIE TO THE CHILD.** If it is going to hurt, tell them.

NON-PHARMACOLOGICAL PAIN RELIEF TECHNIQUES

- ☺ **Kinesthetic:** tactile stimulation during procedures—Holding, patting, the application of heat and cold on an area, stroking/massaging the area. A blanket or toy from home can also provide comfort.
- ☺ **Cognitive/Behavioral:**
 1. Distraction during procedure—A pop-up book, a musical book or instrument (music therapy), bubble blowing, games.
 2. A toy or small keepsake is a good reward.
 3. Parental presence—Parents should be present to help calm the child, not to hold the child down or perform any painful procedures.
 4. Medical play—Pretend play with a doll and toy needles can be used as an example of what will happen to them during the procedure.
 5. Some toddlers can relate to a cartoon or remembrance of a special occasion to help them get through the procedure. This technique in itself is not usually helpful for the toddler.

PRE-SCHOOLER (4 TO 6 YEARS OF AGE)

Very inquisitive. Thinks intuitively, believes there is a cause for everything, continuously asks "Why" and "What" questions. Explanations are best understood if focused on sensation such as "You may feel sleepy" after medication is administered, or an injection "will sting".

PROMOTION OF GROWTH AND DEVELOPMENT

- ☺ Will understand time if associated with familiar activities, but generally does not understand.
- ☺ Allow parents to remain with the child as much as possible.
- ☺ Use toys and replicas of medical equipment when giving medical explanations.
- ☺ Set limits during procedures, i.e. "It's okay to cry", "You need to keep very still".
- ☺ Give short and simple explanations for procedures.

COMMUNICATION AND LANGUAGE / COGNITION

- ☺ Can talk in full sentences and use correct grammar.
- ☺ Has fundamental concepts of culture and language at his/her disposal.
- ☺ Tends to generalize, mixes fact with fiction, thinks magically.

PLAY

- ☺ Participates in cooperative play, interacts with other children.

FEARS

- ⊗ Separation from parents.
- ⊗ Loss of control.
- ⊗ Immobility.
- ⊗ Bodily injury and mutilation.

SAFETY

- ☺ Same as toddlers.

NON-PHARMACOLOGICAL PAIN RELIEF TECHNIQUES

- ☺ **Kinesthetic:** A preschooler may still have the need to be held, patted, and stroked during and after the procedure. (S)he may benefit from a toy/blanket from home.
- ☺ **Cognitive/Behavioral:**
 1. Can use medical play prior to a procedure to rehearse the event. A doll and medical equipment can be used to explain what will happen to them
 2. A reward of a toy is good for this age group, with the introduction of the reward before procedure. ("After we are finished, you can choose a toy!")
 3. Thought stopping—a rhyme can be used by the child to repeat over and over in his/her mind through the procedure to stop negative thoughts or worries about the procedure.
 4. Relaxation/breathing—Can learn muscle group relaxation prior to and during the procedure (**call music therapist**). Some preschoolers like to watch the procedure, or help with preparation or holding equipment during procedure.
 5. Distraction—a story telling adventure, a song (**call music therapist**), or remembering a movie works well with this age.
- ☺ **Imaginal:** The preschooler can be led through guided imagery to remember and play super hero stories or cartoon characters. Remembering a special place or trip is also helpful.

SCHOOL-AGE (6 TO 12 YEARS OF AGE)

Period when the child is directed away from the family group and is centered around the world of peer relationships. They learn to compete and cooperate with others and can comprehend and abide by rules.

PROMOTION OF GROWTH AND DEVELOPMENT

- ☺ Explain to the child how he/she can help.
- ☺ Allow for privacy as much as possible.
- ☺ Be specific about body areas or parts affected and use correct medical terminology.
- ☺ Explain the purpose of the procedure and whether it will hurt.
- ☺ Allow parents and peers to visit as much as possible.

COMMUNICATION AND LANGUAGE / COGNITION

- ☺ Able to read and print.
- ☺ Speech is well developed and expressive.
- ☺ Mastered logical reasoning, understands time, generalizes from experience.

PLAY

- ☺ Period of peer groups and friends.
- ☺ Enjoys hobbies and collecting things.

FEARS

- ⊗ Fearful of mutilation and bodily harm or injury.
- ⊗ Stress is manifested by regression, anxiety, withdrawal, and dependency.

SAFETY

- ☺ More likely to try daring things because they are displaying their independence.

EDUCATION

- ☺ Repeat information as many times as necessary.
- ☺ Use books and examples.

NON-PHARMACOLOGICAL PAIN RELIEF TECHNIQUES

- ☺ **Kinesthetic:** The school-aged child may still need and benefit from a hug, pat, or massage.
- ☺ **Cognitive/Behavioral:**
 1. This age child is most appropriate for procedural preparation. He can rehearse the procedure using real equipment.
 2. A verbal reward along with a toy or other incentive is a positive reinforcement.
 3. Thought Stopping—The school-aged child can use thought stopping and positive self-talk. These techniques use a rhyme or repeated statements that the child says out loud over and over. **(call music therapist)**
 4. This age child can be taught breathing and muscle relaxation techniques prior to the procedure to be used during and after. **(call music therapist)**
 5. Parental presence is usually welcome with this age group, but ask the child.
 6. The child may like to use a headset and listen to music **(call music therapist)**, watch television, or play a video game before, during, or after the procedure.
 7. Guided imagery works well with this age group, used prior to and during the procedure. **(call music therapist)**

ADOLESCENT (13 TO 18 YEARS)

Tumultuous period of rapid maturation and change. Development of identity. Overly pre-occupied with their appearance.

PROMOTION OF GROWTH AND DEVELOPMENT

- ☺ Do not talk down to the adolescent. Use proper medical words.
- ☺ Encourage interests/hobbies that can be pursued in the hospital.
- ☺ Encourage visits from family and friends.
- ☺ Explanation should be thorough and respect his/her privacy and fear of embarrassment.

COMMUNICATION AND LANGUAGE / COGNITION

- ☺ Use of slang in their communication, or peer-group dialect.
- ☺ The adolescent can deal with reality in an appropriate manner and uses abstract thinking.
- ☺ The adolescent often does not want parent in the room for procedures. Ask the individual to decide.
- ☺ They can accept and process direct information about what to expect from a procedure.

PLAY

- ☺ Friends and cultural conditioning make a difference in play activities of adolescents.

FEAR

- ☺ Loss of control, especially loss of consciousness which occurs with anesthesia.
- ☺ Stress is manifested through aggression, irrational behavior, and rebellion.

SAFETY

- ☺ Emphasize automobile safety.

EDUCATION

- ☺ Allow them to be involved in decisions about their own care and treatment and carefully explain everything.
- ☺ Do not discuss "sticky" issues such as sex or drugs in front of parents or peers.

NON-PHARMACOLOGICAL PAIN RELIEF

- ☺ Any of the cognitive/behavioral/imaging techniques can be used with this age.
- ☺ Discuss openly issues involving pain and allow the teen to choose techniques on an individual basis. **(call music therapist)**

**SPICA CAST CARE
INFORMATION AND INSTRUCTION**

Ortho Urgent Care at Orthopaedic Hospital
2400 South Flower Street
Los Angeles, California 90007
(213) 742-1161

Cast Application:

Our Doctor has ordered a spica cast to be placed on your child for an important reason - to maintain a corrective position for your child's fracture. If the cast is to remain on your child as long as the Doctor wants, care must be taken by you to:

1. Prevent cast sores or bed sores.
2. Prevent softening or cracking of the cast.

Problems with the cast?

✓ Warning Signals:

Check for these warning signals every day:

1. Swelling or discoloration of the toes.
2. Toes cold or numb.
3. Child can NOT wiggle his toes.
4. Pain, even if it stops after a short time.
5. Strange odor from the cast. (Put your nose by the cast edges every day and sniff).
6. Child's temperature usually above normal.
7. Cast soft or broken

How to prevent Cast Sores and Bedsores:

1. Skin Care:
 - a. Every day wash and dry the skin on all exposed parts and inside the cast as far as your fingers will reach.
 - b. Several times daily, rub the back and skin at cast edges with rubbing alcohol. This is refreshing and also helps toughen the skin.

If your child isn't toilet trained, follow the instructions for using diapers.

- a. Avoid the use of powder which becomes damp and rolls into small hard balls. Also try to eliminate plaster crumbs. Don't pad the cast edges with cotton as this only increases the pressure.
- b. Warn against poking articles in cast such as pins, pencils, pens, coins, small toys.
- c. Every day look, feel, smell for the warning signs and for skin irritation and redness.

If reddened area does occur, do not allow the skin to become raw and broken. You can do this by - keeping the skin clean and dry, changing your child's position regularly and checking the cast for rough places.

If pain occurs or, if the skin becomes raw, call your Doctor even if the pain stops.

2. Turning and positioning the patient: proper turning and positioning will keep your child comfortable and prevent continuous cast pressure on any one part of him which causes sores to form.
 - a. Turn your child at least every 4 hours during the day and at least twice during the night.
3. Cleaning the Cast:
 - a. If soiled from stool, clean the cast with a damp cloth and cleansing agent without bleach.
4. Finishing the Cast Edges:
 - a. Rough edges may be smoothed by covering them with adhesive tape strips. Be sure to wait until the cast is dry before applying adhesive. (It won't stick to a wet cast).

Activity:

Activity is very important to your child. Let him do whatever he can unless the Doctor sets specific limitations for him. The cast will keep him from doing what he should not. **DO NOT** keep him in bed all the time.

Short-Leg Hip-Spica Cast



Theory Outline

Theory Days: Monday and Wednesday
Skill Lab Days:

Week	Dates	Topic	Chapters	Assign/Due	Exam	Remediation
1	11/28/11 12/01/11	<ul style="list-style-type: none"> • Evolution of Nursing • Legal Ethical Issues • Body Mechanics and Patient Mobility 	FON 1, 2, 15	Ch. 2 outline Due: 12/5/11		
2	12/05/11 12/08/11	<ul style="list-style-type: none"> • Patient Safety • Infection Control 	FON 14, 12	Ch. 12 outline Due:12/12/11	Date: 12/5/11 Test #1-Ch.2, 15	
3	12/12/11 12/15/11	<ul style="list-style-type: none"> • Hygiene and Care of Environment • Nursing Process & Critical Thinking 	FON 18, 6	Ch. 6 outline Due: 12/19/11	Date: 12/12/11 Test #2- Ch.14, 12	Remediation Test #1 FON: 2, 15 Date:12/15/11
4	12/19/11 12/22/11	<ul style="list-style-type: none"> • Communication • Documentation 	FON 3, 7	Ch. 3, 7 outline Due: 1/9/12	Date: 12/19/11 Test #3- Ch. 18, 6	Remediation Test #2 FON14, 12 Date: 12/22/11
	Winter Break	Winter Break 12/23/11 to 1/9/12				
5	01/09/12 01/12/12	<ul style="list-style-type: none"> • Vital Signs • Pain Management, 	FON 4, 16	Ch. 4 outline Due 1/12/12	Date: 1/9/12 Test #4 Ch. 3, 7	Remediation Test #3 FON:18, 6 Date:1/12/12
6	01/16/12 Holiday 01/19/12	<ul style="list-style-type: none"> • Physical Assessment 	FON 5,	Ch. 5 outline Due:1/19/12	Date:1/19/12 Test #5 Ch. 4, 16	Remediation Test #4 FON: 3, 7 Date:1/23/12
7	01/23/12 01/26/12	<ul style="list-style-type: none"> • Health Promotion & Care of Older Adult • Admission, Transfer, Discharge 	FON 33, 11	Ch. 33 outline Due:1/26/12	Date: 1/23/12 Test #6 CH 5	Remediation Test #5 FON 4, 16 Date:1/26/12
8	01/30/12 02/02/12	<ul style="list-style-type: none"> • Life Span Development • Cultural & Ethical Considerations 	FON 9, 8	Ch. 9 outline Due: 2/2/12	Date: 1/30/12 Test #7 FON: 33, 11	Remediation Test #6 FON 5 Date:2/2/12
9	02/06/12 02/09/12	<ul style="list-style-type: none"> • Specimen Collection • Select Nursing Skills 	FON 19 FON 20 (selective pages)	Ch. 20 outline Due:2/13/12	Date: 2/6/12 Test #8 FON 9, 8	Remediation Test #7 FON 33, 11 Date:2/9/12

Week	Dates	Topic	Chapters	Assign/Due	Exam	Remediation
10	02/13/12 02/16/12	<ul style="list-style-type: none"> Wound Care Nutrition 	FON 13, 21		Date:2/13/12 Test #9 FON 19, 20 (sel pgs)	Remediation Test #8 FON 9, 8 Date:2/16/12
11	02/20/12 Holiday 02/22/12 02/23/12	<ul style="list-style-type: none"> Loss, Grief, Dying & Death LTC/Hospice 	FON 10, 38, 40	Ch. 13 outline Due: 2/23/12	Date:2/23/12 Test #10 FON 13, 21	Remediation Test #9 FON 19, 20 Date: 2/23/12
12	02/27/12 03/01/12	<ul style="list-style-type: none"> Principles & Practice of Med Administration Pharmacology Math Review/Systems of Measurement 	FON 23 (sel pgs) Morris 1-5 (Unit 1) Morris 6-9 (Unit 2)		Date: 2/27/12 Test #11 FON 10, 38, 40	Remediation Test #10 FON 13, 21 Date:3/01/12
13	03/05/12 03/08/12	<ul style="list-style-type: none"> Methods of Med Administration and Calculations (Morris Unit Three) 	Morris 10-12 Morris 13-15		Date:3/5/12 Test #12 FON 23 (Select pages) Morris 1-9	Remediation Test #11 FON 10, 38, 40 Date: 3/8/12
14	03/12/12 03/15/12	<ul style="list-style-type: none"> Oral & Parenteral Dosage Forms, Reconstitution Insulin, IV Calculations 	Morris 17-19 (Unit Four) Morris 20, 22		Date: 3/12/12 Test # 13 Morris 10-15	Remediation Test #12 FON 23 (Sel pgs); Morris 1-9 Date:3/15/12
15	03/19/12 03/22/12	<ul style="list-style-type: none"> Module Review Module Review 			Date: 3/19/12 Test #14 Morris 17-19 20, 22	Remediation Test #13 Morris 10-15 Date: 3/22/12
16	03/26/12	Exams				

Module I Exam: 03/26/12

Fundamentals Computer Exam (ATI): 03/27/12

Agenda Item #12.A.2. Attachment L

Oran, Diane@DCA

From: alice sorrell-thompson [healingheartsla@yahoo.com]
Sent: Friday, March 16, 2012 3:57 PM
To: Anderson, Cheryl@DCA
Cc: Oran, Diane@DCA; Alla shustrov
Subject: BVNPT May Start Request
Attachments: Cover Letter.pdf; Attachment 1_CBD College - VN Student Handbook.pdf; Attachment 2_CBD ATI Assessment and Remediation Policy.pdf; Attachment%203_CBD%20Assessment%20for%20NCLEX-VN%20Readiness%20Agreement; 1. Enrollment Data Table.pdf; 2. Faculty and Facility Form.pdf; 4. Maternity and Pediatric Tracking Form.pdf

Greetings Ms. Cheryl and Ms. Oran,

Attached to this email correspondence please find CBD College's request for a May start of fifteen (15) VN students (nondegreed). CBD continues to strive to improve and maintain our NCLEX pass rates so we have attached examples of our most recent interventions. CBD College has come from a low annual pass rate of 30% to 45% in two years. There is much work still to do and the faculty and administration are committed to breaking through this plateau and increasing our NCLEX performance. CBD College is hopeful that the BVNPT will allow us an opportunity to achieve this by considering an extension of our Provisional status. Please contact me for any additional information.

Sincerely,
Alice Sorrell-Thompson

CBD faculty, the Ad Hoc committee has proposed in lieu of the current review sessions a more intensive review process that will be piloted with the next graduation class slated for April 2012.

This review process will consist of a 15-day course that will require the participants to be present for 90% of the course, achieve no less than 65% on practice tests given every review day and achieve no less than 80% on the pre-final and final exams. To accompany this review process, CBD College has developed an NCLEX-VN Readiness Agreement that provides the participants with an outline of the review structure as well as what is required of the participant to successfully complete the NCLEX review process. (See attachment#3 – NCLEX-VN Readiness Agreement).

I know you are aware that coming from a 30% annual pass rate to where we stand now required significant effort. I believe with additional time and stringent oversight CBD can and will achieve the required NCLEX pass rate and maintain it with an opportunity to extend our provisional status. CBD College sincerely reassures the BVNPT that the safe and quality care of all Californians is the cornerstone of our VN program. The administration, faculty and support services of CBD are united and strongly committed to achieving the required NCLEX pass rates in order to assure our graduates enter the nursing workforce and skilled, competent VN nursing professionals.

Sincerely,



Alice Sorrell-Thompson, MBA, RN
Director, Vocational Nursing Program

Enclosed documents:

1. Enrollment Data Table
2. Faculty and Facility Form
3. Faculty Clinical Assignments New Start
4. Maternity and Pediatric Tracking Form

Enclosed Attachments:

1. Attachment #1 – CBD College-VN Student handbook, page 19
2. Attachment #2 – CBD ATI Comprehensive Assessment and Remediation policy
3. Attachment #3 – NCLEX-VN Readiness Agreement

Basis for Theory Grading

Instructors record theory grades for each student using 100 Percent Grading Scale, as follows:

GRADE PERCENT	GRADE	DESCRIPTION	POINT
90 - 100	A	Excellent	4.0
85 - 89	B	Good	3.0
80 - 84	C	Satisfactory	2.0
75 - 79	D	Unsatisfactory	1.0
0 - 74	F	Fail	0.0
	I	Incomplete	0.0
	W	Withdrawal	***

Continued Evaluation

Student scores are continuously monitored. Students failing any of the theory exams in the program are required to meet with the respective instructor, who will develop a plan (“plan for improvement”) indicating the areas needing improvement and the steps to be followed, allowing them, if applicable, to retake the failed exam (see retake policy for more details).

If during any given month or 4 course tests (whichever is greater) the average score for a student is below 80%, the student will be placed on probation for no longer than 30 days and will have to comply with an individual remediation plan to optimize future scores.

Students who do not maintain the minimum pass score during a Module will be placed on probation. Failure in achieving the minimum pass score at the end of a Module may result in repetition of the Module or termination from the program.

Successful completion of the Module

Successful completion of the module requires the combination of all of the following:

- Module Average equal or above 80%;
- “Pass” evaluation on the clinical area; and
- Completion of all theory and clinical hours.

Module Averages

The Module Average will be obtained by the average of all the tests taken in the Module (40%), average of all homework in the Module (10%), Module Test (25%) and ATI Test (25%). CBD College utilizes a computerized system of tests – Comprehensive Assessment and Review Program - provided by ATI Testing to monitor students’ progress.

Module and ATI Tests cannot be retaken.

If the result of the Module Average is lower than 80%, the student will be terminated from the program or will be permitted to repeat the Module. Only one repetition of a module is allowed per program.

ATI Comprehensive Assessment and Remediation Policy

Community Based Education and Development (CBD College) recognizes the benefits of implementing ATI proctored assessments and remediation tools to the VN students. Research has shown that ATI is a strong correlation between successful completion of the ATI proctored assessments and successful first-time pass rate on NCLEX (Davenport, 2007). CBD College has reevaluated their grading policy and integrated ATI assessments and remediation as 25% of the course grade in each of the four program modules.

VN students are required to complete proctored assessments as course requirement. Students will be assigned reading from the ATI review modules. Each module schedule will contain the assigned readings complementing each course topic for that module. Students are encouraged to complete the application exercises, practice assessments and create a focused review to address their specific area of need. 25% of the course grade (20 points) will be calculated as follows:

ATI Practice Assessment	ATI Remediation	ATI Proctored Assessment	ATI Proctored Remediation	ATI Proctored assessment re-take	Total possible points. Course total points = ATI value 25%
1 pt.	1pt	Level 3=14pts	Level 3 5 remediation templates 1 hour focused review	No re-take required If attempted=2pts	20pts/20pts
		Level 2=12pts	Level 2 8 remediation templates 2 hours focused review	No re-take required If attempted=2pts	18pts/20pts
		Level 1=6pts.	Level 1 12 remediation templates 3 hours focused review	Re-take required.	14pts/20pts
		Below level 1=4pts.	Below Level 1 15 remediation templates 4 hours focused review	Re-take required	12pts/20pts

Preparation for the proctored assessment is crucial to student success. Each student is encouraged to complete the assigned reading and applications for each course topic in order to adequately prepare.

The remediation plan for the initial proctored assessment is to create and complete a focused review. Three weeks between the proctored assessment and the re-take proctored assessment is required to ensure the student has sufficient time to study and achieve the body of knowledge presented.

Vocational Nursing Program

Assessment for NCLEX-VN Readiness Agreement

Community Based Education and Development (CBD College) is committed to assisting you to achieve a passing score on the National Council Licensure Examination for Vocational Nursing (NCLEX-VN).

Please be advised that CBD College, **not** the Board of Vocational Nursing and Psychiatric Technicians (BVNPT) or any other accrediting and licensing agency requires that you comply with the following process.

Requirements of Participation in the NCLEX review course.

1. Participants will attend the 15-day review course after they have completed Module IV of the VN program.
2. Participants must be present at least 90% of the 15-day review course.
3. Participant must achieve a percentage score no less than 65% on all the practice tests given during the review course. A percentage score of no less than 80% is required for the pre-final and final course examinations.
4. Participants failing to achieve the required percentage score on the review course final examination will be offered an opportunity to re-take this examination. The participant must score no less than 80% on the re-take examination.
5. Participants failing the re-take examination will be required to complete a 3- week NCSBN online tutorial prior to being scheduled to take another final course examination. This tutorial will be provided by CBD College and hosted on site.
6. Participants failing the second re-take will be scheduled to attend the next review course.
7. Comprehensive Predictor Examination from ATI will be administered after successful completion of the review course. Successful achievement of the Comprehensive Predictor proctored exam requires the participant scores a "PASS" based on the current ATI scoring system.

NOTE:

Students are expected to schedule a date to take the NCLEX-VN exam within 90 days after completion of the review course.

Your signature on this form indicates your understanding of the above Readiness Agreement requirements.

Printed Name

Signature

Date

Please complete the following Enrollment Data Table for all classes currently enrolled and for those that are proposed.

**School Name: Community Based Education and Development
d/b/a CBD College
Revised 03/01/2012**

ENROLLMENT DATA			
CLASS DATES		#Students Admitted at time of class start	Total Enrollment: #Students who are still in the class
Date class started or will start	Date class will Complete		
*11/29/2010	03/25/2012	15	15
**05/23/2011	09/09/2012	15	15
06/20/2011	11/18/2012	30	23
11/21/2011	03/24/2013	15	15
05/21/2012	09/07/2013	15	

* Class will complete before the requested start.

**AASVN

Signature:  Date: _____

Faculty/Student Clinical Assignments

Complete for all currently enrolled and all proposed students.

Use data for your faculty and facilities that will accurately document the status on the first clinical day for your proposed students.

School: Community Based Education and Development: Reflects request for new start of 15 VN (non degreed) students for May 2012.

Faculty name	Assigned facility	# of Students Allowed/ Instructor	# of Students Actually in Group	Level of students being taught	Days of Clinical Experience	Time of Clinical Experience	Pre-conference Time	Post-conference Time
Jackson, Stephanie	Saint John of God	10/1	8	1 (team 1)	Thursday	2:30pm-11:00pm	2:30pm	10:30pm
Jackson, Stephanie	Saint John of God	10/1	8	1 (team 1)	Sunday	2:30pm-11:00pm	2:30pm	10:30pm
Antido, Sheryl	Westlake Center	10/1	7	1 (team 2)	Friday	7:00am-3:30pm	7:00am	3:00pm
Jones, Dorla	Westlake Center	10/1	7	1 (team 2)	Saturday	7:00am-3:30pm	7:00am	3:00pm
Jamiro, Teresita	Country Villa Wilshire	10/1	0 (on hold)	1 (team 3)	Tuesday	7:00am-3:30pm	7:00am	3:00pm
Jamiro, Teresita	Country Villa Wilshire	10/1	0 (on hold)	1 (team 3)	Saturday	2:30pm-11:00pm	2:30pm	10:30pm
Jackson, Stephanie	Saint John of God	10/1	8	2 (team 1)	Friday	7:00am-3:30pm	7:00am	3:00pm
Jackson, Stephanie	Saint John of God	10/1	8	2 (team 1)	Saturday	7:00am-3:30pm	7:00am	3:00pm
Antido, Sheryl	Westlake Center	10/1	7	2 (team 2)	Thursday	7:00am-3:30pm	7:00am	3:00pm
Jones, Dorla	Westlake Center	10/1	7	2 (team 2)	Friday	7:00am-3:30pm	7:00am	3:00pm
Kreuter, Debra	Country Villa Wilshire	10/1	0 (on hold)	2 (team 4)	Wednesday	2:30pm-11:00pm	2:30pm	10:30pm
Pinkney, Michelle	New Vista Post-Acute Care Center	15/1	0 (on hold)	2 (team 3)	Wednesday	2:30pm-11:00pm	2:30pm	10:30pm
Jamiro, Teresita	Country Villa Wilshire	10/1	0 (on hold)	2 (team 4)	Wednesday	7:00am-3:30pm	7:00am	3:00pm
Pinkney, Michelle	New Vista Post-Acute Care Center	15/1	0 (on hold)	2 (team 3)	Friday	2:30pm-11:00pm	2:30pm	10:30pm

Faculty name	Assigned facility	# of Students Allowed/ Instructor	# of Students Actually in Group	Level of students being taught	Days of Clinical Experience	Time of Clinical Experience	Pre-conference Time	Post-conference Time
Johnson, Paula	New Vista Post-Acute Care Center	15/1	5	3 (team 3)	Friday	7:00am-3:30pm	7:00am	3:00pm
Abramyan, Mike	Olympia Medical Center	12/1	8	3 (team1)	Tuesday	2:30pm-11:00pm	2:30pm	10:30pm
Jones, Dorla	New Vista Post-Acute Care Center	15/1	8	3 (team 1)	Sunday	7:00am-3:30pm	7:00am	3:00pm
Abramyan, Mike	Olympia Medical Center	12/1	7	3 (team 2)	Friday	7:00am-3:30pm	7:00am	3:00pm
Bella, Luisa	Saint John of God	10/1	7	3 (team 2)	Saturday	7:00am-3:30pm	7:00am	3:00pm
Abramyan, Mike	Olympia Medical Center	12/1	5	3 (team 3)	Sunday	7:00am-3:30pm	7:00am	3:00pm

Faculty name	Assigned facility	# of Students Allowed/ Instructor	# of Students Actually in Group	Level of students being taught	Days of Clinical Experience	Time of Clinical Experience	Pre-conference Time	Post-conference Time
Lucas, Bernadette	Olympia Medical Center	12/1	8	4 AASVN	Monday	2:30pm-11:00pm	2:30pm	10:30pm
Lucas, Bernadette	Olympia Medical Center	12/1	7	4 AASVN	Wednesday	2.30pm-11:00pm	2:30pm	10:30pm
Lucas, Bernadette	Olympia Medical Center	12/1	7	4 AASVN	Saturday	7:00am-3:30pm	7:00am	3:00pm
Lucas, Bernadette	Olympia Medical Center	12/1	8	4 AASVN	Sunday	7:00am-2:30pm	7:00am	3:00pm
Abramyan, Mike	Olympia Medical Center	12/1	0 (on hold)	4 (team1,2,3)	Monday	7:00am-2:30pm	2:30pm	10:30pm
Bella, Luisa	Kaiser Permanente	10/1	8	4 AASVN	Monday	7:00am-3:30pm	7:00am	3:00pm
Bella, Luisa	Kaiser Permanente	10/1	7	4 AASVN	Wednesday	7:00am-3:30pm	7:00am	3:00pm
Antido, Sheryl	Saint John of God	10/1	8	4 AASVN	Monday	7:00am-2:30pm	2:30pm	10:30pm
Antido, Sheryl	Saint John of God	10/1	8	4 AASVN	Saturday	7:00am-3:30pn	7:00am	3:00pm
Weakley, Freddie	Orthopaedic Hospital	2/1	2 per day per shift	4 (2 per shift)	Mon-Sun	7:00am-3:30pm	7:00am	3:00pm

**Maternity and Pediatric Tracking Form
Community Based Education and Development**

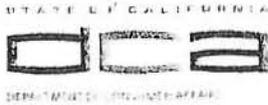
The purpose of this form is to delineate the program's presentation of theory instruction and clinical experience in Maternity Nursing and Pediatric Nursing to enrolled students and to ensure that every student receives the number of hours of theory instruction and clinical training consistent with the Board - approved curriculum.

List each student assignment for Maternity Nursing and Pediatric Nursing. Include both theory instruction and clinical experience, according to the program's instructional plan. Fill in the corresponding week of theory instruction and clinical experience from the program's instructional plan (IP). Modify the form as needed to show the number of students you are requesting and the number of weeks in your terms

Week	IP Wk # 46 (Mod. IV week 1)		IP Wk # 47 (Mod. IV week 2)		IP Wk # 48 (Mod. IV week 3)		IP Wk # 49 (Mod. IV week 4)		IP Wk # 50 (Mod. IV week 5)	
Session	1	2	3	4	5	6	7	8	9	10
Theory for all students	Health Promo of Infant	Health Promo: Child &	Basic Pediatric Care	Basic Pediatric Care	Basic Pediatric Care	Child of Physical Disorder	Child of Physical Disorder	Child with mental	Pregnancy	Pregnancy
Clinical Student 1-10	Ortho - Pediatric	Ortho - Pediatric	Ortho - Pediatric	Ortho - Pediatric	Ortho - Pediatric	OLYM Lucas Sat - DAY	OLYM - Mike - Mon - DAY	OLYM Lucas Sat - DAY	OLYM - Mike - Mon - DAY	OLYM Lucas Sat - DAY
Clinical Student 11-15	OLYM Lucas Sat - DAY	OLYM - Mike - Mon - DAY	OLYM Lucas Sat - DAY	OLYM - Mike - Mon - DAY	OLYM Lucas Sat - DAY	Ortho - Pediatric	Ortho - Pediatric	Ortho - Pediatric	Ortho - Pediatric	Ortho - Pediatric

IP Wk # 57 (Mod. IV week 12)		IP Wk # 58 (Mod. IV week 13)		IP Wk # 59 (Mod. IV week 14)		IP Wk # 60 (Mod. IV week 15)	
23	24	25	26	27	28	29	30
Leadership	Leadership	Leadership	Supervision	Rehab	Rehab	Ped Review	Mat Review
OLYM - Mike - Mon - DAY	OLYM Lucas Sat - DAY	OLYM - Mike - Mon - DAY	Kaiser - Bella - Wed DAY	Kaiser - Bella - Mon DAY	Kaiser - Bella - Wed DAY	Kaiser - Bella - Mon DAY	Kaiser - Bella - Wed DAY
Kaiser - Bella - Wed DAY	Kaiser - Bella - Mon DAY	Kaiser - Bella - Wed DAY	OLYM Lucas Sat - DAY	OLYM - Mike - Mon - DAY	OLYM Lucas Sat - DAY	OLYM - Mike - Mon - DAY	OLYM Lucas Sat - DAY

Agenda Item #12.A.2. Attachment M



STATE INDUSTRIAL RELATIONS BOARD • GOVERNOR • EDUCATION • BROWN • P

BOARD OF VOCATIONAL NURSING & PSYCHIATRIC TECHNICIANS

2535 Capitol Oaks Drive, Suite 205, Sacramento, CA 95833-2945

Phone (916) 263-7800 Fax (916) 263-7866 | Web www.bvnpt.ca.gov



March 19, 2012

Community Based Education and
Development College (CBD)

Vocational Nursing Program
Alice Sorrell-Thompson, Director
3699 Wilshire Blvd., Suite 400
Los Angeles, CA 90010

CERTIFIED

Dear Ms. Sorrell-Thompson:

On May 20, 2011, CBD College came before the Board of Vocational Nursing and Psychiatric Technicians. First, the Board placed the program on provisional accreditation for a one-year period from June 1, 2011, through May 31, 2012. Second, the Board required the program to bring its average annual pass rate to not more than 10 percentage points below the State average annual pass rate for four consecutive quarters by May 31, 2012. Third, the Board required the program to show continued demonstration of progress improvement of its pass rates on the NCLEX/PN. Fourth, CBD was required to show documented progress by submitting a follow-up report in nine months, **but no later than February 1, 2012** which was to include a comprehensive analysis of the program, specific actions taken to improve program pass rates, timeline for implementation, and the effect of employed interventions. Failure to show progress may be cause for reconsideration of provisional accreditation.

This letter serves to notify you that you are scheduled to appear at the May 10, 2012 Board meeting, to address your continued noncompliance with accreditation standards in Article 4 of the VN Practice Act, and Article 5 of the Board's Regulations. Reconsideration of provisional accreditation may be considered. Be prepared to answer questions from Board members at that time.

Should you have questions, please do not hesitate to contact me at (916) 263-7838

Sincerely,

A handwritten signature in cursive script, appearing to read 'Diane Oran'.

Diane Oran, MN, RN, CNS-BC
Nursing Education Consultant

Agenda Item #12.A.2. Attachment N



BOARD OF VOCATIONAL NURSING & PSYCHIATRIC TECHNICIANS
2535 Capitol Oaks Drive, Suite 205, Sacramento, CA 95833-2945
Phone (916) 263-7800 Fax (916) 263-7859 Web www.bvnpt.ca.gov



May XX, 2012

Community Based Education and
Development College (CBD)
Vocational Nursing Program
Alice Sorrell-Thompson, Director
3699 Wilshire Blvd., Suite 400
Los Angeles, CA 90010

Subject: Notice of Change in Approval Status

Dear Ms. Sorrell-Thompson:

Pursuant to the action of the Board of Vocational Nursing and Psychiatric Technicians (Board) on May 11, 2012, the status of the Community Based Education and Development (CBD) Vocational Nursing provisional approval will extend to June 1, 2012 through May 31, 2013. Please sign and return the enclosed "Acknowledgement of Change in Approval Status" form by **Friday, May 30, 2012**.

AREAS OF NON-COMPLIANCE VIOLATION(S)

In accordance with Section 2526.1(c) of title 16 of the California Code of Regulations,

"The Board may place any program on provisional accreditation when that program does not meet all requirements as set forth in this chapter and in Section 2526..."

Section 2530(l) of title 16 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..."

The program pass rates of the Community Based Education and Development (CBD) Vocational Nursing Program for the past seventeen (17) quarters are set forth in the following table.

NCLEX-PN® Licensure Examination Pass Rates			
Quarter	State Annual Average Pass Rate	Program Annual Average Pass Rate	Variance from State Annual Average Pass Rate
Oct – Dec 2007	76%	63%	- 13
Jan – Mar 2008	75%	64%	- 11
Apr - Jun 2008	74%	51%	- 23
Jul - Sep 2008	74%	52%	- 22
Oct – Dec 2008	73%	46%	- 27
Jan – Mar 2009	72%	38%	-34
Apr – Jun 2009	70%	39%	-31
Jul - Sep 2009	72%	32%	-40
Oct – Dec 2009	73%	31%	-42
Jan – Mar 2010	74%	33%	-41
Apr – Jun 2010	75%	33%	-42
Jul – Sep 2010	75%	41%	-34
Oct – Dec 2010	76%	43%	-33
Jan – Mar 2011	77%	48%	-29
Apr-June 2011	76%	48%	-28
Jul-Sep 2011	75%	45%	-30
Oct-Dec 2011	75%	45%	-30

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

REQUIRED CORRECTION(S)

1. Place Community Based Education and Development (CBD) Vocational Nursing on provisional approval status from June 1, 2012 through May 31, 2013 and issue a notice to the program to identify specific areas of noncompliance and requirements for correction as referenced in Section 2526.1 (e) of the California Code of Regulations.
2. Require the program to bring its average annual pass rate to no more than ten (10) percentage points below the State average annual pass rate **by April 1, 2013**.
3. Require the program to submit follow-up reports in nine months, but no later than **February 1, 2013**. The reports must include a comprehensive analysis of the program, specific actions taken to improve program pass rates, timeline for implementation, and the effect of employed interventions. 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.
 - o. Current Enrollment.
4. 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.
 5. 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 approval.
 6. Failure to take any of these corrective actions may cause the full Board to revoke the program's approval.

FUTURE BOARD ACTION

Your program will be placed on the **May 2013** Board Meeting agenda for reconsideration of your approval 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: Prior Board approval is required to admit classes.

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's regulations.

The program may no longer advertise that it has full approval, 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
TBJ/ph
cc: Board Members