

Agenda Item #16.C.4.



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

BOARD OF VOCATIONAL NURSING & PSYCHIATRIC TECHNICIANS

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COVER SHEET

SUBJECT: Preferred College of Nursing, Van Nuys, Vocational Nursing Program.
Consideration of Request to Admit Students (Director: Elizabeth Estrada, Van Nuys, Los Angeles County, Private)

The Preferred College of Nursing, Van Nuys, Vocational Nursing Program has requested approval to admit one (1) class of 20 students beginning January 11, 2016, graduating January 30, 2017.

Recommendations:

1. Require the Preferred College of Nursing, Van Nuys, Vocational Nursing Program to submit a revised policy, and timeline for implementation of the policy, for the evaluation of student progress to determine the need for remediation or removal from the program. Due no later than **December 14, 2015**.
2. Require the program to submit documentation of adequate physical resources to support achievement of the program's objectives. Due no later than **December 14, 2015**.
3. Deny the program's request for approval to admit one (1) class of 20 students beginning January 11, 2016, graduating January 30, 2017.
4. Contingent upon satisfactory submission of documentation of physical resources and a revised policy for evaluation of student progress, **approve** the Preferred College of Nursing, Van Nuys, Vocational Nursing Program's admission of one (1) class of ten (10) students beginning January 11, 2016, graduating January 30, 2017, **only**.
5. Continue to require the program to admit no additional classes without prior approval by the full Board.
6. Require the program director to submit, under penalty of perjury, the names of all enrolled students, dates of admission, placement in the curriculum, and expected dates of graduation by **January 29, 2016**.

Rationale: The program's current average annual pass rate is **65%**, which is **seven (7)** percentage points below the state average annual pass rate. The program has demonstrated incremental improvement in the program pass rate for the past three (3) quarters.

An unannounced program inspection in October 2014 identified a total of 16 violations. As of this writing, a total of eight (8) violations have been corrected and plans have been submitted that, if implemented, would correct four (4) violations.

The program has not submitted documentation verifying additional physical resources and the program has not yet adequately addressed the required corrective action related to evaluation of student progress and need for remediation. This affects two (2) violations. With only three (3) quarters of pass rates within the specified ten percentage points of the state average annual pass rate, this violation is not corrected. The program lacks adequate Maternity nursing clinical facilities to support the number of students that has been requested; therefore, the violation related to adequacy of clinical facilities are not reported as corrected.

Accordingly, the recommendation to reduce the number of approved students is offered.

Board staff will continue to closely monitor the program's progress, including pass rates, implementation of improvement plans, and implementation of corrective actions.

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DATE: November 4, 2015

TO: Board Members

FROM: 
Donna G. Johnson, RNP, MS, MA
Nursing Education Consultant

SUBJECT: Preferred College of Nursing, Van Nuys, Vocational Nursing Program –
Consideration of Request to Admit Students (Director: Elizabeth Estrada, Van Nuys, Los
Angeles County, Private)

The Preferred College of Nursing, Van Nuys, Vocational Nursing Program has requested approval to admit one (1) class of 20 students beginning January 11, 2016, graduating January 30, 2017.

On May 16, 2014, the Board placed the program on provisional approval for the four – month period from May 16, 2014, through September 30, 2014, due to pass rates that were noncompliant with regulatory requirements as set forth in Section 2530 (l) of the Vocational Nursing Rules and Regulations. The Board rescinded approval of the program's ongoing admissions and required the program to obtain approval of the full Board prior to admitting students. Further, the director was required to submit a written report of a comprehensive program analysis, identification of factors negatively impacting student achievement, specific actions taken to improve program pass rates, dates of implementation, the effect of employed interventions, and specific program resources required for achievement of program objectives, no later than June 1, 2014.

On May 30, 2014, the Board received the required comprehensive analysis from the program director and provisional approval was extended through May 31, 2016.

On February 13, 2015, the Board considered a report of an October 2014 unannounced program inspection that identified a total of **16** violations.

History of Prior Board Actions

(See Attachment A, History of Prior Board Actions)

Enrollment

The Preferred College of Nursing, Van Nuys, Vocational Nursing Program is required to obtain approval by the full Board prior to admitting classes.

The following table represents **current and projected** student enrollment based on class starts and completions. The table indicates a **maximum enrollment of 111** students for the period of **May 2009 through January 2016**. However, should the current request be approved, the maximum enrollment would total **20** students.

ENROLLMENT DATA				
CLASS DATES		#Students Admitted	#Students Current or Completed	Total Enrolled
Start	Completed			
5/09 PT – Day		30	15	15
12/09 PT – Eve		40	16	15 + 16 = 31
5/10 PT – Eve		27	14	31 + 14 = 45
11/10 PT – Eve		15	8	45 + 8 = 53
12/10 FT – Day		15	14	53 + 14 = 67
	1/11 (5/9 PT Day)		-15	67 – 15 = 52
3/11 PT – Day		17	15	52 + 15 = 67
	8/11 (12/09 PT Eve)		-16	67 – 16 = 51
9/11 PT – Eve		17	14	51 + 14 = 65
	12/11 (12/10 FT Day)		-14	65 – 14 = 51
1/12 FT – Day		32	21	51 + 21 = 72
	1/12 (5/10 PT Eve)		-14	72 – 14 = 58
2/12 PT – Eve		19	14	58 + 14 = 72
6/12 FT - Eve		16	15	72 + 15 = 87
	8/12 (11/10 PT Eve)		-8	87 – 8 = 79
8/12 PT – Eve		25	16	79 + 16 = 95
	10/12 (3/11 PT Day)		-15	95 – 15 = 80
11/12 PT – Day		25	22	80 + 22 = 102
12/12 FT – Day		17	9	102 + 9 = 111
	12/12 (1/12 Day)		-21	111 – 21 = 90
3/13 PT – Eve		22	20	90 + 20 = 110
	3/13 (9/11 PT Eve)		-14	110 – 14 = 96
	6/13 (6/12 FT Eve)		-15	96 – 15 = 81
9/13 PT – Day		20	20	81 + 20 = 101

ENROLLMENT DATA				
CLASS DATES		#Students Admitted	#Students Current or Completed	Total Enrolled
Start	Completed			
	10/13 (2/12 PT Eve)		-14	101 - 14 = 87
12/13 FT - Day		8	7	87 + 7 = 94
	12/13 (12/12 FT Day)		-9	94 - 9 = 85
3/14 PT - Eve		20	18	85 + 18 = 103
	4/14 (8/12 PT Eve)		-16	103 - 16 = 87
	7/14 (11/12 PT Day)		-22	87 - 22 = 65
	9/14 (3/13 PT Eve)		-20	65 - 20 = 45
	3/15 (12/13 FT - Day)		-7	45 - 7 = 38
	7/15 (9/13 PT - Day)		-20	38 - 20 = 18
	11/15 (3/14 PT Eve)		-18	18 - 18 = 0
1/16 PT - Day (Proposed)	1/17	20		0 + 20 = 20

Licensing Examination Statistics

The following statistics, furnished by the Pearson Vue and published by the National Council of State Boards of Nursing as "Jurisdictional Summary of All First-Time Candidates Educated in Member Board Jurisdiction," for the period January 2010 through September 2015 specify the pass percentage rates for graduates of the Preferred College of Nursing, Van Nuys, Vocational Nursing Program on the National Council Licensure Examination for Practical/Vocational Nurses (NCLEX-PN®), and the variance from state average annual pass rates.

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 [CCR §2530(l)]	Variance from State Average Annual Pass Rate
Jan - Mar 2010	18	11	61%	76%	62%	74%	-12
Apr - Jun 2010	21	13	62%	74%	62%	75%	-13
Jul - Sep 2010	13	9	69%	76%	62%	75%	-13
Oct - Dec 2010	9	6	67%	77%	64%	76%	-12
Jan - Mar 2011	20	16	80%	80%	70%	77%	-7
Apr - Jun 2011	16	10	63%	71%	71%	76%	-5
Jul - Sep 2011	9	5	56%	74%	69%	76%	-7
Oct - Dec 2011	5	5	100%	74%	70%	75%	-5

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 [CCR §2530(I)]	Variance from State Average Annual Pass Rate
Jan - Mar 2012	6	4	67%	77%	67%	74%	-7
Apr - Jun 2012	15	7	47%	72%	60%	74%	-14
Jul - Sep 2012	13	6	46%	74%	56%	74%	-18
Oct - Dec 2012	7	4	57%	70%	54%	74%	-20
Jan - Mar 2013	4	2	50%	75%	49%	73%	-24
Apr - Jun 2013	4	3	75%	78%	54%	73%	-19
Jul - Sep 2013	12	7	58%	75%	59%	74%	-15
Oct - Dec 2013	17	7	41%	76%	51%	76%	-25
Jan - Mar 2014	19	8	42%	74%	48%	76%	-28
Apr - Jun 2014	7	4	57%	66%	47%	73%	-26
Jul - Sep 2014	11	7	64%	72%	48%	73%	-25
Oct - Dec 2014	7	5	71%	72%	55%	72%	-17
Jan - Mar 2015	12	7	58%	73%	62%	71%	-9
Apr - Jun 2015	8	7	88%	69%	68%	72%	-4
Jul - Sep 2015	6	3	50%	73%	65%	72%	-7

*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.

California Code of Regulations 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 approved vocational nursing schools for the same period.”

The above data demonstrates that since placed on provisional approval in May 2014, the program was non-complaint with regulations for an additional three (3) quarters and has been compliant with regulations for the most recent three (3) quarters.

Based on the **most recent data** available (July through September 2015), the program’s average annual pass rate is **65%** The California average annual pass rate for graduates from approved vocational nursing programs who took the NCLEX-PN® for the first time is 72%. The average annual pass rate for the Preferred College of Nursing, Van Nuys, Vocational Nursing Program is **seven (7) 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 number of Board approved faculty totals six (6), including the director, who has 100% time dedicated to administrative responsibilities. All instructors are part-time.

For a maximum enrollment of 111 students and with one instructor per fifteen (15) students in clinical experiences, eight (8) instructors are needed. However, should the current request be approved, maximum enrollment would be **20** students and two (2) instructors are required. Therefore, the existing faculty meets regulatory requirements regarding minimum faculty per number of students for the current enrollment.

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

“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 **lacks** sufficient clinical facilities to afford the number type and variety of patients that will provide clinical experience consistent with competency - based objectives and theory. Specifically, the program lacks adequate clinical facilities for Maternity nursing experience such that the clinical experience is provided in a manner consistent with the Board-approved Instructional Plan.

Other Considerations

When placed on provisional approval on May 16, 2014, the program’s average annual pass rate was 48% and the program had been non-compliant with pass rate requirements for eight (8) consecutive quarters. The Director had requested approval of a major curriculum revision to be implemented with the proposed September 26, 2014 class. However, the revision was never completed.

On September 12, 2014, the Board denied the program’s request to admit students due to a lack of adequate approved clinical facilities with a daily census sufficient to provide a variety of clinical experiences consistent with competency – based objectives and presented theory for the enrolled and proposed student population. The Board required the program to submit documentation of approved clinical experience for Obstetrical and Pediatric Nursing. That documentation was not received.

On December 1, 2014, the director notified the Board of her resignation. On December 29, 2014, a new director was approved by the Board.

As reported to the Board in February 2015, an unannounced program survey visit was conducted by Board representatives on October 28 and 29, 2014. A total of **16 violations** were identified. (See Attachment B).

Based on the October 2014 program inspection and on documentation submitted by the program subsequent to the inspection, the status of the violations as presented to the Board on February 13, 2015 was as follows:

- Violations related to the following were **corrected**.
- 1. List of resources for provision of counseling and tutoring services for students.
- 2. Board notification within ten (10) days of faculty terminations.

3. Written notification to students of the right to contact the Board regarding program concerns.
 4. Written notification to students specifying list of approved clinical facilities.
- Violations related to the following remained **uncorrected**.
1. Use of Board-approved instructional plan.
 2. Failure to make instructional plan available to all faculty.
 3. Program evaluation of the curriculum.
 4. Program evaluation of clinical facilities to which students are assigned.
 5. Screening and Selection policies.
 6. Inadequate resources to support student achievement of program objectives.
 7. Absence of documentation confirming completion of high school or the equivalent for enrolled students.
 8. Methodology for evaluation of student performance to determine the need for remediation or for removal from the program.
 9. Non-compliant program pass rates.
 10. Lack of correlation of theory and clinical experiences
 11. Lack of clinical facilities sufficient to support the accomplishment of learning objectives

The Board directed the program to submit a report no later than March 1, 2015 that:

- Confirmed correction of violations identified during the onsite inspection;
- Identified implemented interventions; and
- Included, under penalty of perjury, the names of all enrolled students, dates of admission, placement in the curriculum, and expected dates of graduation.

On March 1, 2015, the program director submitted the required report identifying implemented interventions to correct the violations. (See Attachment C). In summary, the program reported the following information.

- The Board-approved Instructional Plan was being utilized.
- The program presented a document signed by faculty that they had a copy of the Board-approved Instructional Plan.
- The program reported the director had performed an “initial brief program evaluation” and that the program curriculum evaluation will be conducted yearly towards the end of each year.
- The program presented copies of evaluations, conducted by students and faculty, of clinical facilities conducted in February 2015.
- The program stated the program director would oversee “overall implementation of the screening and selection process” and will “supervise, advise, and guide the admission coordinator” and that applicants to the program would be interviewed by the program director and assistant director.

- The program described that the skills laboratory was being restructured, supplies had been requested and “this is currently under its planning stage.” The program also described that a resource center was being designated, to include on-line resources for students, and that the director had created a “Student Success Plan” to assist with NCLEX preparation.
- The program described that only one student was still missing documentation of completion of high school or the equivalent and that the student had been informed of the need for GED completion.
- The program described intent to evaluate student progress every 16 weeks in the first year (full-time) and every 9 weeks in the second year. Part-time students would be evaluated every 24 weeks in the first year and every 17 weeks in the second year. Failure in a course module would result in use of an “Anecdotal Form.” It would be the student’s responsibility to request tutoring for scores below the 75% minimum pass level and instructors would decide on the method of remediation for a failed course. Two (2) remediations per term would be allowed and one failed course per term could be remediated.
- The program presented a list of “plans to meet with the administration to seriously initiate the following” related to actions to improve the pass rates on the licensure examination.
- The program described the addition of a clinical facility for maternity nursing and a return to a clinical facility for pediatric nursing. The program described a delayed graduation date in order to provide the required clinical experience.
- The program described a plan to provide faculty inservice related to clinical instruction.

On March 13, 2015, the program submitted the required comprehensive analysis. (See Attachment D). The report is summarized below and Board staff analysis and concerns are presented in *Italics*.

- **Admission, Screening, and Selection Criteria:** The program reports implementation “of a highly selective screening criteria” and notes a minimum passing score of 80% on an entrance examination as well as panel interview. The program reports future candidates must present original documents for proof of completing secondary education.

Analysis: *This would be implemented with the next approved admission. However, the program did not identify what entrance examination would be utilized, how many times it could be repeated, or how frequently the entrance examination could be taken.*

- **Instructional Plan:** The program reported a need to review the program’s Instructional Plan for update and alignment with the current NCLEX-PN® test plan. This was to be conducted April to June of 2015.

Analysis: *The program had previously identified the need for revision of the curriculum. No documentation of the proposed review has been provided.*

- **Clinical Objectives for Each Course:** The program noted a “need for ongoing monitoring of implementation” and noted a plan for a faculty inservice in the second quarter of 2015.

Note: *No follow-up documentation was provided.*

- **Faculty:** The program noted a plan for faculty development and teaching competency during the 2015 school year.

Note: *No follow-up documentation was provided.*

- **Instruction:** See above regarding revision of instructional plan.

- **Academic Advising, Counseling, and Tutoring:** The program presented a plan to assign faculty members to assist students and provide tutoring.

- **NCLEX-PN Passing Rate:** The program planned to continue to provide NCLEX review and ATI® Predictor Exit Exam.

- **Clinical Facilities for Maternity:** The program reported on the plan to assign a program coordinator to pursue more clinical facilities and explore making a contract with certified simulation centers.

Note: *One (1) clinical facility application was pending as of the director's resignation.*

On August 7, 2015, the Board was notified of the program director's resignation. On August 26, 2015, the Board approved a new program director. Between August 27 and September 15, 2015, the assigned consultant conducted seven (7) phone consultations with the new program director.

On September 16, 2015, the program submitted a revised request to admit students, current information regarding the program, and an updated response to the violations identified during the course of the October 2014 program inspection. (See Attachment E). A summary follows. Analysis from Board staff is noted in *Italics*.

- **Historical Perspective:** A brief summary of events was offered.
- **Current Information:** A new program director was approved in August 2015 and a request to be placed on the agenda for consideration of a request to admit students was offered. Summary points were offered:
 - 1) “The Board is asked to review information with an objective point of view not utilizing information from formerly closed PCN campuses.” The program reported that the PCN-Van Nuys campus “is now being managed and operated with new leadership.”
 - 2) “New investors are in the process of executing their option to purchase PCN.” The program further states, “The last item that will trigger purchase is the approval from the BVNPT of a new cohort.”
 - 3) The program reported on the solid experience of the new director.
 - 4) The program reported on pass rate improvements.

➤ **Response to Violations:** The program updated corrective actions as follows:

1. **Violation #1** – Board-approved Instructional Plan now in use.

Analysis: *This violation is **corrected**.*

2. **Violation #2** – The new program director plans to complete a curriculum assessment and report to the Board and reports a curriculum committee has been developed.

Analysis: *The program has presented a plan, which, if implemented, would correct the violation.*

3. **Violation #3** – The new program director plans to visit all clinical rotation sites and has reviewed recent student clinical facility evaluations.

Analysis: *The program has presented a plan, which, if implemented, would correct the violation.*

4. **Violation #4** – The new program director will supervise the Admissions Coordinator, a list of criteria is offered (as in the March 1, 2015 report), the program director reports being “satisfied with the Admissions Criteria Checklist now being utilized,” and the program reports an Admissions Personnel Training workshop was completed on September 4, 2015.

Analysis: *Specifics of admissions testing was not offered, as noted above. However, the required actions have been addressed. The program has presented a plan, which, if implemented, would correct the violation.*

5. **Violation #5** – A list of counseling and advising services was provided to students.

Analysis: *This violation is **corrected**.*

6. **Violation #6** – The program provided an updated list of faculty.

Analysis: *This violation is **corrected**.*

7. **Violation #7** – The program described four-week NCLEX review sessions being conducted by a specialist for all program graduates and students. A list of personnel and tasks was provided. The program reports the purchase of additional skills laboratory supplies and repair, reorganization, and cleaning of the facility.

Analysis: *Documentation of additions to the skills lab has not been presented. The program did not address availability of computers for student use for proctored testing and use of instructional materials. This violation is **not corrected**.*

8. **Violation #8** – Faculty are now in receipt of the approved instructional plan.

Analysis: *This violation is **corrected**.*

9. **Violation #9** – The program reports the one student missing documentation of completion of high school or the equivalent has now passed the GED and “is still waiting for [the] certificate to be mailed.”

Analysis: *The program has presented a plan, which, if implemented, would correct the violation.*

10. **Violation #10** – The program reports the identification of “major discrepancies with the monitoring, counseling, and support of students who were not meeting academic requirements for progressing from one term to another.” The program further reported deficiencies were not addressed as they occurred and that the “college did not identify and provide the necessary educational support along the way.”

Analysis: *This violation is **not** corrected.*

11. **Violation #11** – The right to contact the Board has been posted.

Analysis: *This violation is **corrected**.*

12. **Violation #12** – The list of clinical facilities has been posted.

Analysis: *This violation is **corrected**.*

13. **Violation #13** – The program reported the plan to incorporate ATI resources to assist students and the minimum passing rate on the predictor exam (an exit requirement) will be increased to 92%.

Analysis: *The program pass rate has been within 10 percentage points of the state average annual pass rate for the last three (3) quarters. As such, this violation is currently **not yet** corrected.*

14. **Violation #14** – The program reported students are now attending Maternity clinical nursing rotations and reported on clinical facility applications in progress.

Analysis: *The program has sent students to Maternity and Pediatric nursing clinical facilities since the October 2014 program inspection. Due to limitations on number of students allowed at Maternity facilities, students did not complete rotations in a manner consistent with the Board-approved Instructional Plan. The program now has a total of three (3) physician offices for Maternity nursing experience. However, the most recent proposal for Maternity nursing theory and clinical experience would require eight (8) weeks, as opposed to the three (3) weeks called for in the Board-approved Instructional plan. In the extension of time to complete clinical experience, correlation with theory is lost. This violation is **not** corrected.*

15. **Violation # 15** – The program reports clinical instructors are directed to post clinical objectives on the nursing unit of facilities and that students are provided with a copy as well.

Analysis: In addition, students are now getting Maternity and Pediatric clinical experience. This violation is now **corrected**. However, the clinical facilities currently approved for use are inadequate for the number of students requested.

16. Violation # 16 – See violation #3, above.

As noted above, the program was **not** able to document adequate clinical facilities for the number of proposed students. On October 15, 2015, the assigned consultant conducted a phone consultation with the program director and discussed the limitation of clinical facilities for maternity nursing.

Summary

The program's average annual pass rate is currently **65%**, which is **seven (7)** percentage points **below** the state average annual pass rate. A total of eight (8) violations are now corrected. The program has described plans that, if implemented, would correct violations related to evaluation of the curriculum, evaluation of clinical facilities, implementation of screening and selection criteria, and documentation of completion of high school or the equivalent. Additional documentation of adequate physical resources will correct the violation related to lack of adequate physical resources to support the program objectives. As noted in the program's September 16, 2015 correspondence, deficits were identified in the evaluation of student progress and determination of the need for removal from the program.

The program has submitted documentation of placement plans for proposed students. That documentation indicates that, in order to place 20 students in currently approved clinical facilities for Maternity nursing, a total of eight (8) weeks would be required. The Board-approved Instructional Plan calls for Maternity nursing theory and clinical to be presented over the course three (3) weeks. As such, the program has **inadequate** clinical facilities to provide the required experience in a manner that is consistent with the Board-approved Instructional Plan and that maintains correlation with theory. With currently approved clinical facilities, the program has adequate facilities to accommodate a total of ten (10) students.

The program is on the Board's May 2016 agenda for reconsideration of provisional approval.

Recommendations:

1. Require the Preferred College of Nursing, Van Nuys, Vocational Nursing Program to submit a revised policy, and timeline for implementation of the policy, for the evaluation of student progress to determine the need for remediation or removal from the program. Due no later than **December 14, 2015**.
2. Require the program to submit documentation of adequate physical resources to support achievement of the program's objectives. Due no later than **December 14, 2015**.
3. Deny the program's request for approval to admit one (1) class of 20 students beginning January 11, 2016, graduating January 30, 2017.
4. Contingent upon satisfactory submission of documentation of physical resources and a revised policy for evaluation of student progress, **approve** the Preferred College of

Nursing, Van Nuys, Vocational Nursing Program's admission of one (1) class of ten (10) students beginning January 11, 2016, graduating January 30, 2017, **only**.

5. Continue to require the program to admit no additional classes without prior approval by the full Board.
6. Require the program director to submit, under penalty of perjury, the names of all enrolled students, dates of admission, placement in the curriculum, and expected dates of graduation by **January 29, 2016**.
7. Continue the program's placement on the Board's May 2016 agenda for reconsideration of provisional approval.

Rationale: The program's current average annual pass rate is **65%**, which is **seven (7)** percentage points below the state average annual pass rate. The program has demonstrated incremental improvement in its program pass rates on the NCLEX/PN® for the past three (3) quarters.

An unannounced program inspection in October 2014 identified a total of 16 violations. As of this writing, a total of eight (8) violations have been corrected and plans have been submitted that, if implemented, would correct four (4) violations. The program has not submitted documentation verifying additional physical resources and the program has not yet adequately addressed the required corrective action related to evaluation of student progress to determine progress or need for remediation. This affects two (2) violations. With only three (3) quarters of pass rates within the specified ten percentage points of the state average annual pass rate, this violation is not corrected. The program lacks adequate Maternity nursing clinical facilities to support the number of students that has been requested; therefore, the violation related to adequacy of clinical facilities is not reported as corrected.

Accordingly, the recommendation to reduce the number of approved students is offered.

Board staff will continue to closely monitor the program's progress, including pass rates, implementation of improvement plans, and implementation of corrective actions.

- Attachment A: History of Prior Board Actions
- Attachment B: Notice of Violations
- Attachment C: Program Correspondence Dated March 1, 2015
- Attachment D: Program Correspondence Dated March 13, 2015
- Attachment E: Program Correspondence Dated September 16, 2015

Agenda Item #16.C.4., Attachment A

PREFERRED COLLEGE OF NURSING, VAN NUYS VOCATIONAL NURSING PROGRAM

History of Prior Board Actions

- On April 27, 2001, the Board approved the school's request to begin a part-time weekend vocational nursing program with an initial class of 20 students on May 11, 2001, only. The Board also approved the vocational nursing curriculum of 1,550 hours, including 590 theory and 960 clinical hours. The program is 75 weeks in length. Classes are held on Fridays, Saturdays and Sundays. There are 5 terms, each 15 weeks long.
- On September 6, 2002, the Board approved initial accreditation for the Preferred College of Nursing Vocational Nursing Program for the period from May 11, 2001, to September 5, 2006. Additionally, the Board approved the school's request to admit 20 students into the part-time weekend class on December 8, 2002, only, to **replace** students graduating December 7, 2002.
- On June 20, 2003, the Board approved the school's request to begin a second 75-week part-time evening program of 20 students on July 8, 2003, only. This class is known as the part-time Tuesday-Thursday class.
- On September 19, 2003, the Board approved the school's request to begin a full-time program of 20 students on October 10, 2003, only.
- On February 20, 2004, the Board approved the school's request to begin a part-time program (Wednesday and Friday class) of 20 students on March 26, 2004, only.
- On May 14, 2004, the Board approved the program's request to admit 30 students into the part-time week-end class starting June 18, 2004, only, to replace students graduating on June 13, 2004.

The Board approved the program's request to increase class size from 20 to 30 students per class in both the part-time and full-time programs.

The Board approved on-going admissions to **replace** graduating classes, only, for the Preferred College of Nursing, Panorama City, Vocational Nursing Program with the stipulation that no additional classes are to be added to the program's current pattern of admissions without prior Board approval. The program's current pattern of admissions includes 1 part-time weekend class, 1 part-time Tuesday & Thursday evening class, 1 part-time Wednesday & Friday evening class and 1 full-time class Monday through Friday per year, each admitting 30 students per class.

- On September 10, 2004, the Board approved the program's request to admit 30 students into a fourth part-time Tuesday, Wednesday, Thursday class starting on October 28, 2004, only, with a projected completion date of May, 2006.

- On April 21, 2005, the director notified the Board of a location and address change to Van Nuys, California. The name of the school was changed to reflect this change as Preferred College of Nursing, Van Nuys.
- On June 20, 2005, the director submitted a plan to improve NCLEX-PN pass rates, as requested by the consultant.
- On September 16, 2005, the Executive Officer approved the program's request to admit 30 students into the Monday through Friday full-time class starting on September 19, 2005, with a projected graduation date of September 22, 2006, replacing the students that graduate on September 28, 2005; approved the program's request to admit 30 students into the Su-M-W-F part-time program starting on October 3, 2005, with a projected graduation date of June 4, 2007, to replace students graduating October 10, 2005; **and** approved ongoing admissions to **replace** graduating classes, only, for the program with the following stipulations:
 - a. No additional classes are added to the program's current pattern of admissions without prior Board approval. The program's current pattern of admissions includes one full-time class which admits once each calendar year and four part-time classes which admit every 18 months.
 - b. The director documents that adequate resources, i.e. faculty and facilities, are available to support each admitted class of students.
- On October 20, 2005, the Board notified the director that the program's pass rates had fallen more than ten (10) percentage points below the state average pass rate for the fourth quarter. The school was acknowledged for submitting a written plan for pass rate improvement and requested that any additional plans currently implemented be submitted to the Board.
- On February 8, 2006, the Board notified the director that the program's pass rates had fallen more than ten (10) percentage points below the state average pass rate for the fifth quarter.
- On May 12, 2006, the Executive Officer approved continued full accreditation for the Preferred College of Nursing, Van Nuys, Vocational Nursing Program for the period from September 5, 2006, through September 4, 2010, and issued a certificate accordingly.
- On December 6, 2006, the Executive Officer approved the program's request to admit 40 students into the Monday, Wednesday, Friday, and Saturday part-time program starting on January 26, 2007, with a projected graduation date of July 18, 2008.

The Board approved the program's request to increase the class size from 30 to 40 students per class.

- On January 5, 2007, the director notified the Board of a modification of the part-time program scheduled to start January 26, 2007. The start date was changed to February 6, 2007 with a projected graduation date of July 18, 2008. Instead of a Monday, Wednesday, Friday, and Saturday schedule, a change was made to a Monday, Tuesday, Friday, and Saturday schedule.
- **On September 15, 2008 a new director was approved.**

- **On March 11, 2009 a new director was approved**
- On April 23, 2010, the Board received the program's completed Program Records Survey for Continued Accreditation and required supporting documents.
- On July 22, 2010, the Executive Officer approved continued full accreditation for the Preferred College of Nursing, Van Nuys, Vocational Nursing Program for the period September 5, 2010 through September 4, 2014, and issued a certificate accordingly; **and**, continued approval of the program's ongoing admission pattern of one (1) full-time class of 40 students once each year and four (4) part-time classes of 40 students which admits every 18 months to **replace** outgoing students only, with the following stipulation: the program must maintain an average annual licensure pass rate within ten (10) percentage points of the California average annual licensure examination pass rate, consistent with Section 2530 (I) of the Vocational Rules and Regulations.
- On April 16, 2012, the Executive Officer approved the following recommendations:
 1. Deny Preferred College of Nursing, Vocational Nursing Program's request to admit an additional full-time evening class of 40 students and **approve** a class of 30 students with a commencement date of April 18, 2012 and graduation date of May, 25 2013 **only**.
 2. Continue the program's approval for ongoing admissions of one (1) full-time class of 40 students each year and four (4) part-time classes of 40 students every 18 months to **replace** graduating students only, with the following stipulations:
 - a. No additional classes are added to the program's current pattern of admissions without prior Board approval. The current pattern is approval is one (1) Full-time class each year and four (4) Part-time classes every 18 months.
 - b. The director documents that adequate resources, i.e. faculty and facilities, are available to support each admitted class of students.
 - c. The program's average annual pass rate is no more than ten (10) percentage points below the state average annual pass rate.
- On May 16, 2014, the Board placed the program on provisional approval for the four - month period from May 16, 2014, through September 30, 2014, 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. **Further**, the Board rescinded approval of the program's ongoing admissions; **and** required the program to admit no additional classes without prior approval by the full Board; **and** required the program to submit a written report no later than **June 1, 2014**. The report was to include a comprehensive analysis of the program including all elements in the previously submitted plan of correction, to identify factors negatively impacting student achievement, to identify specific actions taken to improve program pass rates and dates of implementation, to identify the effect of employed interventions, and to identify specific program resources required for

achievement of program objectives. **Further**, the Board directed that if the program fails to submit the report as specified by **June 1, 2014**, the program would be placed on the **September 2014** Board agenda for reconsideration of provisional approval; **and**, if the program submits the report as specified by **June 1, 2014**, the Board would extend the program's provisional approval from September 30, 2014 through May 31, 2016.

The Board also required the program to bring its average annual pass rate to no more than ten (10) percentage points below the State average annual pass rate; **and** required the program to demonstrate incremental progress in correcting the violations; and if the program fails to satisfactorily demonstrate incremental progress, the full Board may revoke the program's approval.

The Board also required the program to submit follow-up reports in two (2) months, but no later than **July 1, 2014**, and 21 months, but no later than **February 1, 2016**. 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.

Also on May 16, 2014, the Board required the program to comply with all approval 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 **and** the Board noted that failure to take any of these corrective actions may cause the full Board to revoke the program's approval.

- On May 27, 2014, the Board forwarded to the director the Notice of Change in Approval Status. That document identified violations, required corrections, and timeline for completion.
- On May 30, 2014, the Board received the director's comprehensive analysis.
- On July 15, 2014, with curriculum revision in process, the Board received electronic correspondence from the director indicating she would be out of the country until August 25, 2014.

- On August 11, 2014, electronic and telephonic communication with the Assistant Director clarified the lack of obstetrical clinical experience.
- On September 12, 2014, the Board denied the program's request to admit students. The Board also required the program to admit no students without approval of the full board and the Board required documentation of approved clinical experience for obstetrical and pediatric nursing.
- On October 28 and 29, 2014, an unannounced program survey was conducted.
- On November 12, 2014, the Board sent, via certified mail, Notice of Violations.
- On November 19, 2014, the Board sent, via certified mail, revised numbering of the identified violations.
- On November 26, 2014, the Board notified the program of placement on the February 2015 Board agenda for reconsideration of provisional approval and consideration of the report of the unannounced program survey visit.
- On December 1, 2014, the Board received a notice of resignation from the program director.
- On December 5, 2014, the Board sent correspondence to the program administrator regarding the need for active administration of the program and the need for response to previous Board correspondence.
- On December 12, 2014, the Board sent, via certified mail, correspondence to the program regarding additional required corrective action.
- On December 15, 2014, the Board received the program's response to the violations.
- On December 29, 2014, the program administrator sent, via electronic correspondence, a request for placement on the February 2015 Board agenda for a request to admit students.
- On December 29, 2014, the Board informed the administrator the deadline passed on December 15, 2014.
- **On December 29, 2014, a new director was approved.**
- On February 13, 2015, the Board approved the following:
 1. Require the Preferred College of Nursing, Van Nuys, to correct violations identified during the onsite inspection and submit a report identifying implemented interventions no later than **March 1, 2015**.
 2. Continue to require the program to admit no additional classes without prior approval by the full Board.

3. Require the program director to submit, under penalty of perjury, the names of all enrolled students, dates of admission, placement in the curriculum, and expected dates of graduation by **March 1, 2015**.
 4. Require the program director, under penalty of perjury, to submit documentation of clinical experiences for both Pediatric and Maternity Nursing for all students scheduled to graduate in 2015 **prior** to graduation.
 5. Require the program to submit a written report no later than **March 13, 2015**. The report shall include a comprehensive analysis of the program including identification of factors negatively impacting student achievement, specific actions taken to improve program pass rates, dates of implementation, the effect of employed interventions, and specific program resources required for achievement of program objectives. 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.
 6. Continue to 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.
 7. Continue to 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.
 8. Continue to require the program to comply with all approval 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.
 9. Continue the program's placement on the program on the Board's May 2016 for reconsideration of provisional approval.
- On August 26, 2015, the Board approved a new program director.

Agenda Item #16.C.4., Attachment B.



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

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CERTIFIED MAIL

November 19, 2014

Joievelynn Herra, Director
Vocational Nursing Program
Preferred College of Nursing, Van Nuys
6551 Van Nuys Blvd # 200
Van Nuys, CA 91401

Subject: Renumbering of Identified Violations (no change in content)

Dear Ms. Herra,

On October 28 and 29, 2014, the Board of Vocational Nursing and Psychiatric Technicians (Board) made an unannounced survey visit to Preferred College of Nursing, Van Nuys. Based on the survey visit, the following violations were identified:

Section 2526(a)(7) of the Vocational Nursing Rules and Regulations states:

"The institution shall apply to the Board for approval. Written documentation shall be prepared by the director and shall include:
... (7) Instructional Plan"

Violation #1: Based upon review of documents provided by the program during the survey visit and based upon interviews with an instructor and the director, the school is not using an instructional plan.

Required Action: Provide the Board with a copy of the Board approved Instructional Plan.
Due no later than December 15, 2014.

Section 2526(a)(8) of the Vocational Nursing Rules and Regulations states:

"The institution shall apply to the Board for approval. Written documentation shall be prepared by the director and shall include:
... (8) Evaluation methodology for curriculum."

Violation #2: Board files confirm that the program has a methodology and procedure for evaluation of the curriculum. Board representatives requested evidence of evaluation of the curriculum. However, program representatives did not produce the requested documentation substantiating that the curriculum had been evaluated to determine its currency, effectiveness, consistency with the NCLEX/PN® test plan, or the need for revision. The director verified that the curriculum was not being evaluated and she requested help in understanding how to evaluate a curriculum.

Required Action: Provide a plan for evaluation of the curriculum and a timeline in which curriculum evaluation will be accomplished.
Due no later than December 15, 2014.

Section 2526(a)(11) of the Vocational Nursing Rules and Regulations states:

“The institution shall apply to the Board for approval. Written documentation shall be prepared by the director and shall include:

... (11) Evaluation methodology for clinical facilities.”

Violation #3: Board files confirm that the program has a methodology and procedure for evaluation of clinical facilities. Board representatives requested evidence of evaluation of the curriculum. Program representatives did not produce the requested documentation substantiating that clinical facilities had been evaluated. There were some examples of students evaluating some of the clinical facilities. However, there was no indication of follow – up with the concerns expressed by the students.

Required Action: Provide documentation of evaluation of clinical facilities and a proposed timeline for ongoing evaluation of clinical facilities. Evaluation of clinical facilities should include, but not be limited to:

- 1) When in the program the facility is utilized by students;
- 2) Describe the types of experience available as related to the ability of the students to meet the program's stated clinical objectives;
- 3) Description of observed evidence of correlation of theory to clinical;

- 4) Description of evidence of correlation of theory to clinical;
- 5) Dates students are in the clinical site;
- 6) Identified problems;
- 7) Plan to correct problems.

Due no later than December 15, 2014.

Section 2526(a)(13) of the Vocational Nursing Rules and Regulations states:

"The institution shall apply to the Board for approval. Written documentation shall be prepared by the director and shall include:

... (13) Screening and selection criteria.

Violation #4:

Based on review of student files, the program failed to follow its Board approved screening and selection policies as noted by the admission of four (4) students who had no documentation of a score for the school - created entrance exam.

Required Action:

Provide a plan for correction that describes how the program will follow the policy for screening and selection of applicants to the program. Provide verification of training, of all individuals associated with the school, regarding admission, screening and selection policies.

Due no later than December 15, 2014.

Section 2526(a)(16) of the Vocational Nursing Rules and Regulations states:

"The institution shall apply to the Board for approval. Written documentation shall be prepared by the director and shall include:

... (16) List of resources for provision of counseling and tutoring services for students.

Violation #5:

No list of resources was found on campus or in the Student Catalog. The Student Catalog describes an Office of Student Services. The Student Catalog further states: "**Counseling and Advising Services** – where students obtain help with educational, career, and personal concerns from a trained staff of counselors, specialists, and advisors." The director confirmed that no licensed or trained specialists are on staff. No list of outside resources for either tutoring or counseling is offered to students.

Required Action: Provide a schedule of tutoring and documentation that tutoring is offered. Provide a list of resources in the community for other tutoring and counseling services. Provide evidence of how a list of resources is made available to students.
Due no later than December 15, 2014.

Section 2527(b) of the Vocational Nursing Rules and Regulations states:

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

Violation #6: Board representatives examined all files of current faculty at the school. The program reports utilizing twenty-two part – time faculty. The 2014 Annual Report lists three faculty members who are no longer teaching in the program. The program has failed to notify the Board of the termination of program faculty as prescribed by regulation.

Required Action: Provide termination dates of all faculty not utilized within the past twelve (12) months. Provide a list of current faculty and all assignments through the completion of all currently enrolled students.
Due no later than December 15, 2014.

Section 2530(a) of the Vocational Nursing Rules and Regulations states:

“The program shall have sufficient resources, faculty, clinical facilities, library, staff and support services, physical space, skills laboratory and equipment to achieve the program’s objectives.”

Violation #7: The program currently has forty-five students enrolled. However, based on survey observations and an analysis of staff and support services, supplies, equipment, and physical space required to accommodate the maximum or current enrollment, Board representatives determined that the program lacks sufficient resources to achieve its objectives.

There are fourteen computer stations available to students in the computer lab. Classroom trash cans were full and the carpet evidenced dirt and stains. Class room walls were

nearly bare, with only a few posters or visual aids. There were empty offices and the director reported the loss of support staff, prep time for instructors, and verbalized staff hours have been reduced. The director also reported that NCLEX review and the use of ATI had been discontinued due to economic problems at the school. She noted that currently the school is again providing NCLEX review and a partial product from ATI that provides some proctored tests for students. The assistant director reported that the director's hours are less than previously allotted.

Board representative observed that the skills lab consisted of five (5) beds and a total of one mannequin with a tracheostomy. Two sinks were available. Models of body parts were stained and dirty. There was a model of a fetus in utero and a birthing pelvis with newborn. While the lab did contain some supplies related to wound care, care of a tracheostomy, and a medication cart, there were minimal sterile supplies and protective personal equipment for students to practice with.

Required Action: Provide a detailed plan and timeline for improving resources sufficient to achieve the program's objectives.
Provide a list of resources and supplies to be purchased.
Provide a list of support staff and their duties to support the program.
Due no later than December 15, 2014.
Provide verification of the purchases as they are made.

Section 2530(f) of the Vocational Nursing Rules and Regulations states:

"The program's instructional plan shall be available to all faculty."

Violation #8: The program failed to provide an instructional plan that was available for all faculty. (See Violation #1)

Required Action: Provide documentation that each faculty member has received a copy of the Board approved Instructional Plan.
Due no later than December 15, 2014.

Section 2530(g) of the Vocational Nursing Rules and Regulations states:

“Each school shall have on file proof that each enrolled student has completed a general education course of study through the 12th grade or evidence of completion of the equivalent thereof. Equivalency is determined by the Department of Education in any of the United States or by a nationally-recognized regional accrediting body. “

Violation #9: Board representatives reviewed the files of all current students and also files of the most recent graduates. A total of two (2) student files did not contain documentation of completion of high school or equivalency.

Required Action: Provide verification that each currently enrolled student has proof of high school graduation or the equivalent in the student file. Provide a specific plan to eliminate the possibility of this violation in the future and provide a timeline and method of implementation of this plan.
Due no later than December 15, 2014.

Section 2530(i) of the Vocational Nursing Rules and Regulations states:

“The school shall evaluate student performance to determine the need for remediation or removal from the program.”

Violation #10: During the survey visit, Board representatives reviewed files of all current students and the most recent graduates. The program's grade books, kept separately from student files, were also examined.

Grade books documented below minimum final exam grades. In some cases, there were no indications of any remediation of the failing grade. Other documentation indicated that unit tests were failed by multiple students. However, documentation of a remediation plan, tutoring, and subsequent follow-up to the remediation plan were not in evidence in student files or other program documents.

Required Action: Provide a detailed written proposal, including timeline for implementation for:

- 1) Revision of the grading process and policy;

2) Remediation plan, including appropriate follow-up with students.

Due no later than December 15, 2014.

Section 2530(j)(1) of the Vocational Nursing Rules and Regulations states:

"Each school shall advise students, in writing, of the following:

(1) Right to contact the Board of program concerns."

Violation #11: The right to contact the Board was not in evidence in the program's student handbook, nor was it posted on site.

Required Action: Provide verification that students have access to information regarding the right to contact the Board both on site at the campus and in the Student Handbook.
Due no later than December 15, 2014.

Section 2530(j)(4) of the Vocational Nursing Rules and Regulations states:

"Each school shall advise students, in writing, of the following:

(4) List of Board approved clinical facilities.

Violation #12: A list of Board – approved clinical facilities was not posted in the student handbook, nor was it posted on site.

~~**Required Action:** Provide verification that students are provided a list of approved clinical sites currently in use by the program.
Due no later than December 15, 2014.~~

Section 2530(l) of the Vocational Nursing Rules and Regulations states:

"The Board 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 approved vocational nursing schools for the same period."

Violation #13: The program's average annual pass rate has been greater than ten (10) percentage points **below** the state average annual pass rate for fifteen (15) of the twenty – five (25)

quarters for which data were examined. **Over the last ten (10) consecutive quarters, the program's average annual pass rates have been 14 - 28 percentage points below state average annual pass rates.**

Required Action: Provide an update to the written action plan to improve pass rates on the licensing examination.
Due no later than December 15, 2014.

Section 2533(a) of the Vocational Nursing Rules and Regulations states:

"Vocational nursing programs shall include theory and correlated clinical experience."

Violation #14: The Board - approved curriculum includes theory and correlated clinical experience. However, based on observation and an analysis of available clinical rotations, the program failed to provide clinical experience that correlated with presented didactic content in Maternity Nursing. According to the director and an instructor, no Maternity nursing clinical sites are available to the students. Students studying Maternity nursing theory at the time of the survey visit were engaged in clinical experience in an adult skilled nursing facility.

Required Action: Provide a rotation schedule demonstrating each student's rotation through a Board approved clinical facility offering Maternity nursing experience before graduation from the program.
Due no later than December 15, 2014.

Section 2882 of the Vocational Nurse Practice Act states:

"The course of instruction of an approved school of vocational nursing shall consist of not less than the required number of hours of instruction in such subjects as the board may from time to time by regulation determine, together with the required number of hours in the care of medical, surgical, obstetrical patients, sick children, and such other clinical experience as from time to time may be determined by the board."

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. Clinical objectives which students are expected to master shall be posted on patient care units utilized for clinical experience.”

Violation #15:

As noted above, in Violation #16, the program has no clinical facilities providing Maternity nursing experience. Board representatives observed that clinical objectives are not posted on the nursing unit of the clinical facility and, as identified by the director and the clinical instructor, student assignments are based on need of the facility rather than the clinical objectives the students are expected to accomplish. Students in the last term of the program were assigned only one patient at a time and none of the students interviewed in the clinical site had, as yet, performed tasks such as catheter insertion and suctioning, despite the fact they were in the last term of the program. This indicates that competency-based objectives are not being accomplished and it is also an indication that theory and clinical practice are not correlated.

Required Action:

Submit clinical facility applications for Maternity nursing experience by **December 1, 2014**.

Provide documentation of the listing of clinical objectives on the nursing unit.

Provide documentation of training of clinical instructors regarding correlation of theory and clinical, terminal objectives of the program, and how to accomplish clinical objectives in an approved clinical facility.

Due no later than December 15, 2014.

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

“Schools are responsible for the continuous review of clinical facilities to determine if the student’s clinical objectives for each facility are being met.”

Violation #16: As noted in Violation #3, program representatives failed to produce documentation substantiating the evaluation of clinical facilities.

Required Action: Provide documentation of evaluation of clinical facilities and a proposed timeline for ongoing evaluation of clinical facilities. Evaluation of clinical facilities should include, but not be limited to:

- 1) When in the program the facility is utilized by students;
- 2) Describe the types of experience available as related to the ability of the students to meet the program's stated clinical objectives;
- 3) Description of observed evidence of correlation of theory to clinical;
- 4) Description of evidence of correlation of theory to clinical;
- 5) Dates students are in the clinical site;
- 6) Identified problems;
- 7) Plan to correct problems.

Due no later than December 15, 2014.

Be advised that the continuation of such violations jeopardizes your program's approval.

Should further information be needed, please feel free to contact us at (916) 263-7843

Sincerely,

Donna G. Johnson, RNP, MS, MA
Nursing Education Consultant

Pam Hinckley, RN, MSN
Nursing Education Consultant



CERTIFIED MAIL

December 12, 2014

Marilyn Rosow-Cooper, Assistant Director
Vocational Nursing Program
Preferred College of Nursing, Van Nuys
6551 Van Nuys Blvd #200
Van Nuys, CA 91401

Subject: Additional Corrective Action Required

Dear Ms. Rosow-Cooper,

As you know, at the recent program survey visit a number of violations were identified. The purpose of this letter is to inform you of an additional corrective action that is required as a result of new information regarding previously identified violations.

Section 2533(a) of the Vocational Nursing Rules and Regulations states:

"Vocational nursing programs shall include theory and correlated clinical experience."

Violation #14:

The Board - approved curriculum includes theory and correlated clinical experience. However, based on observation and an analysis of available clinical rotations, the program failed to provide clinical experience that correlated with presented didactic content in Maternity Nursing. According to the director and an instructor, no Maternity nursing clinical sites are available to the students. Students studying Maternity nursing theory at the time of the survey visit were engaged in clinical experience in an adult skilled nursing facility.

Additional Data: Board representatives conducted a review and analysis of pediatric clinical facilities presented as current clinical facilities on the 2014 Annual Report. Each facility was contacted. The following was identified:

1) Kaiser Panorama City Medical Center has had no students from Preferred College of Nursing, Van Nuys,

Vocational Nursing program since the contract was signed 6/9/09

2) All Saints Healthcare has never had students from Preferred College of Nursing, Van Nuys, Vocational Nursing program in pediatric units.

3) Family Health Care Clinic has not had students from Preferred College of Nursing, Van Nuys, Vocational Nursing program in pediatric experience since September 2011. A representative from the program called approximately one month ago but they are not accepting students at this time.

4) Totally Kids has not had students from Preferred College of Nursing, Van Nuys, Vocational Nursing program in pediatric experience at any time.

Therefore, there are **no pediatric clinical experiences available to students.**

Required Action:

Provide a rotation schedule demonstrating each student's rotation through a Board approved clinical facility offering Maternity nursing experience before graduation from the program.

Due no later than December 15, 2014.

Additional Required Action:

Provide a rotation schedule demonstrating each student's rotation through a Board approved clinical facility offering Pediatric nursing experience before graduation from the program.

Due no later than January 9, 2015.

Section 2882 of the Vocational Nurse Practice Act states:

"The course of instruction of an approved school of vocational nursing shall consist of not less than the required number of hours of instruction in such subjects as the board may from time to time by regulation determine, together with the required number of hours in the care of medical, surgical, obstetrical patients, sick children, and such other clinical experience as from time to time may be determined by the board."

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. Clinical objectives which students are expected to master shall be posted on patient care units utilized for clinical experience.”

Violation #15:

As noted above, in Violation #16, the program has no clinical facilities providing Maternity nursing experience. Board representatives observed that clinical objectives are not posted on the nursing unit of the clinical facility and, as identified by the director and the clinical instructor, student assignments are based on need of the facility rather than the clinical objectives the students are expected to accomplish. Students in the last term of the program were assigned only one patient at a time and none of the students interviewed in the clinical site had, as yet, preformed tasks such as catheter insertion and suctioning, despite the fact they were in the last term of the program. This indicates that competency-based objectives are not being accomplished and it is also an indication that theory and clinical practice are not correlated.

Additional Data: Board representatives conducted a review and analysis of pediatric clinical facilities presented as current clinical facilities on the 2014 Annual Report. The following was identified:

- 1) Kaiser Panorama City Medical Center has had no students from Preferred College of Nursing, Van Nuys, Vocational Nursing program since the contract was signed 6/9/09
- 2) All Saints Healthcare has never had students from Preferred College of Nursing, Van Nuys, Vocational Nursing program in pediatric units.
- 3) Family Health Care Clinic has not had students from Preferred College of Nursing, Van Nuys, Vocational Nursing program in pediatric experience since September 2011. A representative from the program called approximately one month ago but they are not accepting students at this time.
- 4) Totally Kids has not had students from Preferred College of Nursing, Van Nuys, Vocational Nursing program in pediatric experience at any time.

Therefore, there are **no pediatric clinical experiences available to students.**

December 12, 2014
Preferred College of Nursing, Van Nuys
Notice of Violation
Page 4 of 4

Required Action: Submit clinical facility applications for Maternity nursing experience by **December 1, 2014**.
Provide documentation of the listing of clinical objectives on the nursing unit.
Provide documentation of training of clinical instructors regarding correlation of theory and clinical, terminal objectives of the program, and how to accomplish clinical objectives in an approved clinical facility.
Due no later than December 15, 2014.

Additional Required Action: Submit clinical facility applications for Pediatric nursing experience by **January 9, 2015**.

Be advised that the continuation of such violations further jeopardizes your program's approval.

Should further information be needed, please feel free to contact me.

Sincerely,
Donna G. Johnson
Donna G. Johnson, RNP, MS, MA
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Agenda Item #16.C.4., Attachment C. ¹



Preferred College of Nursing Van Nuys, Vocational Nursing Program Response to Reconsideration of Provisional Approval Based on Report of Unannounced Survey Visit

Preferred College of Nursing Van Nuys was approved to begin a vocational nursing program on May 11, 2001 with an initial class of 20 students. The Board of Vocational Nursing and Psychiatric Technicians (BVNPT) approved the program curriculum for 1550 hours, including a 590 theory hours and 960 clinical hours. The curriculum was presented and submitted in the form of "Instructional Plan." On October 28 and 29, 2014, BVNPT representatives conducted an unannounced program survey visit in consideration with its provisional status, which will expire by May 31, 2016. The visit resulted in a total of sixteen (16) violations. On November 19, 2014, the BVNPT sent to the program the Notice of Violations. The BVNPT required the program to submit corrective actions of those mentioned violations based on California Code of Regulations/Vocational Nursing Rules and Regulations. On December 15, 2014, Preferred College of Nursing submitted to BVNPT its response. On December 29, Preferred College of Nursing was approved of its new Program Director. On January 13, 2015 Board Meeting, Preferred College of Nursing was included in the agenda. Recommendations were listed in response to the school's reconsideration of provisional approval status based on Report of Unannounced Survey Visit. On February 18, 2015, Preferred College of Nursing Program Director and BVNPT Nurse Education Consultant had a phone conversation concerning the recommendations from the BVNPT of the remaining uncorrected violations. Discussion of the remaining violations, corrective actions performed, and evidence of correction are presented in the table format below.

Violations	Corrective Actions Performed	Accompanying Evidence of Correction
Violation # 1 Section 2526 (a) (7) of the Vocational Nursing Rules and Regulations states:	Violation # 1 Analysis of the documents provided by the program during the survey visit and interviews with an instructor and the director evidenced the program's	Appendix A: Instructional Plan 2000 original date with revision of parts in 2001 and 2006. (Please see attachment).



<p>“ The institution shall apply to the Board for approval. Written documentation shall be prepared by the director and shall include:(7) Instructional Plan.</p>	<p>failure to provide instruction consistent with the Board – approved instructional plan.</p> <p>Response (Corrective Action):</p> <p>The Preferred College of Nursing - Van Nuys utilized only one “Instructional Plan” since its approval in May 2001. Part of this Instructional Plan was submitted to BVNPT in 2000 during the program’s development process and then parts of it were updated in 2001 based on the recommendations then by the supervising NEC. Likewise, part of the Instructional Plan was revised in 2006 (Urinary System). Hence, parts of the Instructional Plan indicated the original date 2000 while the subsequent parts were dated 2001 as well as 2006. The program officially started on May 11, 2001. Part of the Instructional Plan was also titled “Curriculum Objectives.” Thus, at some of the pages of the original Instructional includes the word</p>	<p>Appendix B:</p> <p>Faculty attestation of reviewing and using the attached “Instructional Plan” as the one being officially used for Preferred College of Nursing Van Nuys instruction. (Please see attachment).</p>
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	<p>“Curriculum” as a running head descriptor. Attached is the original “Instructional Plan,” the same as the one submitted to the Board on December 15, 2014 which matches the Instructional Plan approved by the Board in 2001. This current “Instructional Plan” that the program utilized was reviewed and presented to the members of the faculty. As an attestation that the current “Instructional Plan” has been presented, reviewed, and being utilized by the members of the PCN VN program faculty members, a sign-in sheet indicating their review and utilization of the current IP is attached herewith.</p>	
<p>Violation # 2</p> <p>Section 2526 (a) (8) of the Vocational Nursing Rules and Regulations states:</p> <p>“The institution shall apply for the Board approval. Written documentation</p>	<p>Violation # 2</p> <p>Board files confirm that the program has a methodology and procedure for evaluation of the curriculum. However, the program representatives failed to produce documentation substantiating that the curriculum had been evaluated to determine its currency, effectiveness,</p>	<p>Appendix C</p> <p>Evaluation of Program Curriculum by its Program Director</p>  <p>Preferred College of Nursing Van Nuys V</p>



<p>shall be prepared by the director and shall include: (8) Evaluation methodology for the curriculum.</p>	<p>consistency with the NCLEX-PN® test plan, or the need for revision. Further, the director verified that the curriculum was not evaluated and she requested help in understanding how to evaluate a curriculum.</p> <p>Preferred College of Nursing Vocational Nursing Program has an evaluation method in place for its VN Program curriculum evaluation. The evaluation of the VN program curriculum includes examining the program curricular components to measure success of the program, establish benchmarks, and continually improving the quality of the program. For the PCN Van Nuys Vocational Nursing Program, the criteria use in evaluating its curriculum include examining the appropriateness, effectiveness, and applicability to the current societal/stakeholders needs of the following components:</p> <ul style="list-style-type: none"> • Philosophy of the program • Overall purpose or goal or the program. • Program Terminal Objectives 	
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	<ul style="list-style-type: none"> • Implementation Plan • Enrollment trends/ Retention/and Attrition rates of the students in the program. • Achievement: NCLEX-PN Passing Rate • Graduation Rate • Alumni Milieu • Administrators • Faculty • Staff <p>The program director performed an initial brief program evaluation for Preferred College of Nursing Van Nuys using the above criteria. The program curriculum evaluation will be conducted yearly towards the end of each year. Using the Educational Program Assessment Questionnaire and other components such as enrollment trend, students current and completed the program as well as current NCLEX-PN® Licensure examination Data. Please see attached evaluation Summary.</p>	
<p>Violation # 3</p>	<p>Violation # 3</p>	<p>Appendix D</p>



<p>Section 2526 (a) (11) of the Vocational Nursing Rules and Regulations states:</p> <p>“The institution shall apply to the Board for approval. Written documentation shall be prepared by the director and shall include: (11) Evaluation methodology for Clinical Facilities.</p>	<p>Board files confirm that the program has a methodology and procedure for evaluation of clinical facilities. Program representatives failed to produce documentation substantiating that clinical facilities had been evaluated. There were some examples of students evaluating some of the clinical facilities. However, there was no indication of follow-up with the concerns expressed by the students.</p> <p>Response (Corrective Action):</p> <p>Currently, Preferred College Nursing Vocational Nursing Program employs dual evaluation process for current clinical facilities. One that is based on students’ evaluation and evaluation by the school through the clinical faculty. The evaluation of clinical facilities is being performed at the end of each clinical course module or rotation (e.g. Maternity Nursing Module, Medical-Surgical Module – Urinary System Module). Attached are the</p>	<p>Current Evaluation of Clinical Faculty and Students of the existing clinical facilities (Maternity – Dr. Latiff’s Clinic and Canyon Oaks Nursing and Rehabilitation Center). Please see attachment.</p>
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	<p>current evaluation performed by the students and clinical faculty for the currently used and existing clinical facilities for the PCN VN program:</p> <ul style="list-style-type: none"> • Dr. Latiff's Maternity Clinic Evaluation by students and faculty. • Canyon Oaks Nursing and Rehabilitation Center Faculty Evaluation. Student's evaluation to follow. <p>Facility Evaluation on the process.</p> <ul style="list-style-type: none"> • Goldstar Healthcare evaluation will be performed when the students completed their module as well as faculty evaluation and Director evaluation to ensue. • Facility evaluation for Sun Valley Specialty Healthcare (Formerly Totally Kids Specialty Healthcare) to be performed when the students completed 	
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their pediatric rotation/module as well as faculty evaluation and Director evaluation to ensue.

The plan with regards to Facility Evaluation is for the Director of the VN Program to closely monitor all current facility being use as will as future ones to address the issue of facility's appropriateness and effectiveness towards students' learning. It is the goal of the program to reinvigorate the evaluation process of clinical facilities by closely working with the Program Clinical Coordinator and members of the Faculty to ensure that an optimum learning experience of current and future students is ensured. A newly created survey tool will be used for this purpose (see attached **Externship Site Evaluation by Faculty**). The Program Director will analyze the evaluation result and will make proposal or modifications that will be addressed towards the clinical facility representative and the collaborating clinical faculty.



<p>Violation # 4</p> <p>Section 2526 (a) (13) of the Vocational Nursing Rules and Regulations states:</p> <p>“The institution shall apply to the Board for approval. Written documentation shall be prepared by the director and shall include: (13) Screening and selection criteria</p>	<p>The program was requested to complete the following by December 15, 2014:</p> <ol style="list-style-type: none"> 1. Provide a plan for correction that describes how the program will follow the policy for screening and selection of applicants to the program. 2. Provide verification of training, of all individuals associated with the school, regarding admission, screening and selection policies. <p>Response (Corrective Action):</p> <p>Currently Preferred College of Nursing has an existing procedure of screening and selecting candidates for the program. The screening and selection criteria are reflected in the school’s catalog. The current Program Director will oversee the overall implementation of the screening and selection process. The Program Director will also supervises, advises, and guides the admission coordinator in performing</p>	<p>Appendix D</p> <p>Evidence for admission, screening, and selection criteria.</p>  <p>Plan for Correction- Admission-Screenin</p>
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the screening and selection procedure as well as coordinates the other members of the screening and selection panel. Any applicant will undergo a thorough screening process by requiring the following information:

- *Graduation from an accredited high school or GED equivalents in U.S. or Official transcript evaluation.*
- *Minimum of 17 years of age.*
- *Must Possess Social Security or Tax I.D. number.*
- *Must arrange an appointment with the Admission Coordinator who will confirm that eligibility requirements have been met and will issue a permit to take the entrance test.*
- *Passing score of 80% in the Entrance Exam.*

Furthermore, the student candidate will undergo/submit:



	<p>1. Two (2) letters of recommendation required on the day of interview. 2. Completed application and all eligibility requirements reviewed and verified by the Program Director; and 2. Interview conducted by a panel composed of the Program Director, Assistant Program Director.</p> <p>Attached is the procedure of screening and selection and the qualifications of the individuals involved with the admission, screening, and selection process.</p>	
<p>Violation # 7</p> <p>Section 2530 (a) (13) of the Vocational Nursing Rules and Regulations states:</p> <p>“The program shall have sufficient resources, faculty, clinical facilities, library, staff and support services, physical space, skills laboratory, and</p>	<p>Violation # 7</p> <p>Survey observation and an analysis of staff and support services, supplies, equipment, and physical space required to accommodate the maximum or current enrollment confirmed that the program lacks sufficient resources to achieve its objective.</p> <p>Response:</p>	



<p>equipment to achieve the program's objectives."</p>	<p>Preferred College of Nursing Van Nuys VN program is currently restructuring its skills laboratory to become more functional for simulation training of its students. This begun with creating a more clinical/patient unit environment. Supplies for standard precaution (e.g. non-sterile and sterile gloves, disposable gowns, goggles, mask, disposable headgear) were asked from the administration during the last compliance meeting on February 11, 2015 to be purchased and existing supplies are restocked at the skills laboratory for proper use. A support staff was hired part-time to assist in the cleaning and maintenance of the skills laboratory. During the compliance meeting, the administration has been requested of purchasing one low fidelity mannequin that can be used for wide-ranging types of patient care as well as a pediatric (baby mannequin) for optimal learning experience of the students especially in pediatric skills and procedures (e.g. feeding via NGT of pediatric patient, tracheal suctioning,</p>	
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comfort measures, etc.). This is currently under its planning stage. The school also designated a **Student Resource Center**. This center provides books, journals, periodicals, newspapers, online reference resources, CD-ROMS, videotapes, and computer workstations for online access and research and other audio-visual learning devices. Square Footage: 532 sq. ft.

With regards to providing the students with adequate preparation for their NCLEX-PN examination as well as improving the entire PCN students' test-taking skills, critical thinking skills, and addressing issues on specific course learning objectives, the PCN Program Director has personally created a "Student Success Plan" by having 6-7 hours NCLEX-PN preparation, critical thinking sessions using NCLEX-type questions, and tutorial on any course every Saturdays starting mid-March 2015. This session is open to all students with priority on the graduating



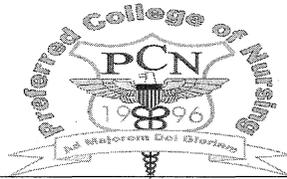
	<p>students. Likewise, the administration has extended the access of the graduating students to ATI until April 30, 2015 in preparation for their comprehensive examination (ATI Predictor Testing) and the NCLEX-PN examination.</p> <p>Clinical faculty were advised also to coordinate with the clinical partners for the use of clinical partner's facility/resources for skills and procedures that can be adequately taught (e.g. Maternity and Pediatric skills as well as some procedures in Medical-Surgical component of the program that are beyond the current means of the skills laboratory). The hours will be credited towards the actual clinical hours of the student. This can also be considered for student's clinical remediation (as needed).</p>	
<p>Violation # 8</p>	<p>Violation # 8</p>	<p>See Appendix B. (Please see attachment).</p>



<p>Section 2530 (f) of the Vocational Nursing Rules and Regulations states:</p> <p>“The program’s instructional plan shall be available to all faculty.”</p>	<p>The program failed to provide an instructional plan that was available for all faculty. (See Violation # 1).</p> <p>Response (Corrective Action):</p> <p>The Program Director has provided all of the current faculty of PCN VN program, the opportunity to review the current and existing “Instructional Plan” (as attached herewith) as previously approved by the Board on February 27 and 28, 2015. A separate binder containing the current and existing “Instructional Plan” is placed at the instructor’s office. As attestation to this, a sign-in (log) sheet was created and signed by the current faculty members to confirm their access and understanding of how and when to use the PCN Instructional Plan.</p>	
<p>Violation # 9</p>	<p>Violation # 9</p> <p>The program failed to have on file proof that each enrolled student</p>	<p>Appendix E.</p>



<p>Section 2530 (g) of the Vocational Nursing Rules and Regulations states:</p> <p>“Each school shall have on file proof that each enrolled student has completed a general course of study through the 12th grade or evidence of completion of the equivalent thereof. Equivalency is determine by the Department of Education in any of the United States or by a nationally –recognized regional accrediting body.”</p>	<p>has completed a general education course of study through the 12th grade or the equivalent thereof, as required. Board representatives reviewed the files of all current students and the most recent graduates: A total of two (2) student files did not contain documentation of completion of high school or equivalency.</p> <p>Response (Corrective Action):</p> <p>The program’s NEC had a thorough conversation with the newly approved Program Director on the case of student whose file was found to be lacking the documentation of completing the 12th grade or the equivalent thereof in early January. Only one student file was noted lacking during this phone conversation. As a response, the Program Director had evaluated the submitted documents of the student. The student was</p>	<p>Notice of Compliance Regarding a Lacking Requirement about Proof of 12th grade or its equivalency by an admitted student.</p> <p></p> <p>Letter to Student with Incomplete Proof</p>
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	<p>interviewed by the program director and advised to provide the lacking documents within 90 days of the notification (January 23, 2015). Currently, the student is in the process of completing the lacking/missing document by enrolling in a GED program of the high school where the student last attended. Attached is the notification to the student for completion of missing requirements.</p>	
<p>Violation # 10</p> <p>Section 2530 (i) of the Vocational Nursing Rules and Regulations states:</p> <p>“ The school shall evaluate student performance to determine the need for remediation or removal from the program.”</p>	<p>Violation # 10</p> <p>Review and analysis of student files provided during the inspection confirmed that the program failed to evaluate student performance, identify deficit performance, develop a plan and timeline for remediation, or complete re-evaluations to ensure resolution of identified deficits.</p>	



Board representatives reviewed files of all current students and the most recent graduates, including the program’s grade books. Gradebooks documented below minimum final grades. In some cases, there were no indications of any remediation of the failing grade. Other documentation of a remediation plan, tutoring, and subsequent follow-up to the remediation plan were not in evidence in student files or other program documents.

Response (Corrective Action):

Preferred College of Nursing Van Nuys has the following existing policy and procedure concerning evaluation of student performance to determine the need for remediation or removal from the program. The following Satisfactory Academic Progression Policy, Academic Probation Policy, Tutorial Policy, Termination/Dismissal Policy, and Remediation Policy are reviewed with faculty to ensure that everyone involved in the student progress are on the same



understanding and agreement to the execution of these policies. The official School Catalog also reflected these existing policies for students' immediate access. The newly appointed Program Director will review all existing student file together with the school record custodian to ensure that appropriate documentations are filed within each student's file starting March 2, 2015.

The current policies of Preferred College of Nursing Vocational Nursing Program will be closely implemented under the leadership of the new Program Director as stipulated below as well as more efficient filing method to ensure all documents pertaining to student training will be included in their student file to include:

- Close supervision of the Program Director on Record Custodian performance.
- Faculty will directly submit files to the Record custodian within 24 hours post theory or clinical



instruction of documents necessary to include in the student's file not limited to examination results, remediation, and/or probationary status documentations.

- The program will maintain only one original record file for the student which can be located at the Record Custodian's office.

Satisfactory Academic Progression Policy

Federal regulations require that all schools participating in any Federal Financial Aid program must adhere to a Satisfactory Academic Progress (SAP) policy. These are the standards by which student's progress toward the completion of their program of study. Preferred College of Nursing measures the student's progress to determine continued eligibility for financial aid as well as success in their program.



The Vocational Nursing program requires 1550 hours for completion. **Satisfactory academic progress for full-time students will be measured every 16 weeks for the first academic year and every 9 weeks for the second academic year. Part-time students will be measured every 24 weeks for the first academic year and every 17 weeks for the second academic year.**

The Director of the Program has identified this timeline as appropriate timeline of evaluating each student progress in the program. However, any difficulty or failure in each course module should be acknowledge and documented during mid-term examination by the involved faculty using an "Anecdotal Form." The "Anecdotal Form" has been used by the program to document any student 's concerns in both academic and non-academic situation. An initial academic counseling and tutorial will be initiated by the involve theory faculty and a copy



	<p>of academic counseling will be submitted to the Program Director and the original copy will be placed in the student's file. Likewise, clinical instruction should also immediately evaluate the student's progress every instructional session and will document any difficulty on non-meeting of learning objectives. The initial counseling and tutorial will be initiated by the involved clinical faculty and a copy of clinical counseling and plan tutorial will be submitted to the Program Director. The original copy of the outlined counseling and tutorial using an "Anecdotal Form" will be placed in the student's file. A copy of the anecdotal form will provide the timeline as to when the student should meet a tutor/or the instructor for remediation of skills. Once the student successfully demonstrated the skill or procedure that the involved clinical faculty will sign-off the anecdotal report to close the case and a copy will be given to the Program Director and the original copy to the file of the student. If the academic</p>	
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concern or non-academic concern is not resolved within the specific faculty's authority, the faculty will defer the concern to the Program Director and the program Director will notify the student of the necessary remediation (See Tutorial and Remediation Policy below).

The faculty and existing students will be reviewed of the exiting Remediation Policy and Procedure to follow on March 14, 2015 to ensure compliance if necessary among existing students.

Tutorial Policy

If a student's grade is failing below the minimum passing grade of 75% per school policy, he/she has to make a request for and make time to attend tutorial/review session with any available instructor to be assigned by the Program Director. It is the student's responsibility to make an appointment with the instructor or the Director.



If the student does not follow this procedure, the student faces the consequences of failing a subject. If the student failed a subject for whatever reason, he/she has to follow the school's procedure for remediation.

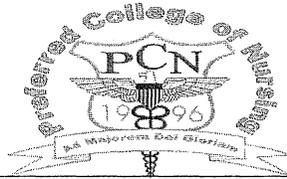
Student's decision to undergo alternative methods of tutorial of their choice must be documented and signed by the student.

Remediation Policy

Remediation is required when a student fails to achieve a passing grade in any individual course of study. Student needing remediation must do so within the specified time. Clinical hours should be made up according the same schedule. Instructors will select the method of remediation according to individual student's needs and focusing on clinical and/or theory objectives.



A student will be allowed to participate in a written evaluation (test) to demonstrate successful meeting of remediated subject objectives. If a student successfully demonstrates that he/she has met the course objectives by successfully passing the remediation examination (achieving a grade of 75% or above) the student's permanent record would reflect a passing score of no more than 75%. If the student fails the remediation examination (achieving a grade lower than 75%), the student will then receive whichever is the higher of the two grades (original failed grade or the remediation examination grade). The higher grade would reflect on student's transcript of records. During Terms 1 to 5, the student is allowed two (2) total remediations for each Term or one (1) failed remediation. If the student remediates for the second time, he/she will be placed on probation. If the student incurs one failed remediation, he/she will be placed on probation; any additional failing grade in a course will



prompt the student's immediate termination from the Term. **The Student Academic Performance Committee (Program Director, Assistant Program Director, Program Clinical Coordinator, and Involved Faculty Member)** reserves the right to allow the terminated student to repeat. Student to repeat only the failed subjects for the term or repeat the whole Term after a careful review and deliberation. If a student fails the course Fundamentals of Nursing after the remediation, he/she has to repeat the course on the basis of space availability and is not allowed to progress because this is a prerequisite for all succeeding nursing courses. Satisfactory academic progress standards must be maintained to ensure completion of the program within the maximum time-frame allowed (one and half times the program scheduled hours). Students who had remedial of courses are closely watched for signs of possible failure and are reminded and offered tutorial. However, if a student cannot make time



to attend tutorial, the student will provide the office in writing an acceptable alternative method of assistance in improving his/her grade. Student's decision to undergo alternative method of tutorial must be documented and signed by the student.

Academic Probation Policy

If the Student remediates for the second time or if the student incurs one failed remediation in any Term of the program he/she will be placed on academic probation. Remediation will remain on the student's probationary record until student successfully demonstrates meeting of objectives in the remediated subject. Probationary status may also be initiated if a student's performance jeopardizes minimum patient care standards, or when patterns of behavior of performance interfere with a student's progress. The administration may initiate probation when the student is not meeting the theory and/or clinical objectives.



	<p><i>Procedures:</i></p> <ul style="list-style-type: none"> • Student shall be promptly informed in writing of probationary status (This student status will be documented via Anecdotal Report). • Student placed on probation shall be counseled, according to established probationary status. The terms of the probation will be stated in writing, to include criteria for removal of probationary status. <p>Student whose performance remains below minimal acceptable standards will be dismissed from the program after an interview with the Program Director.</p> <p>Termination/Dismissal Policy</p> <p>A student may be terminated/dismissed from the program based on the following:</p>	
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	<ul style="list-style-type: none"> • It has been concluded that all efforts of remediation of the student have been exhausted. • The student continues to be deficient in theory and/or clinical practice despite several remediation sessions. • The student is unable to conduct himself/herself in a professional manner in the classroom and/or clinical session. <p>After a maximum of two (2) remediated theory/clinical subjects in or one (1) failed remediation, the student still continues to be deficient on an additional subject either theory or clinical.</p>	
<p>Violation # 13</p> <p>Section 2530 (l) of the Vocational Nursing Rules and Regulations states:</p>	<p>Violation # 13</p> <p>The program's average annual pass rate has been greater than ten (10) percentages below the state average annual rate for fifteen (15) of the twenty-five (25) quarters for which</p>	



<p>“The Board shall maintain a yearly average minimum pass rate on the licensure examination that does not fall below 10 percentage point of the state average pass rate for the first time candidates of approved vocational nursing school for the same period.”</p>	<p>data were examined. Over the last consecutive quarters, the program’s average annual pass rates have been 14-28 percentage points below state average annual pass rates.</p> <p>Plan Corrective Action:</p> <p>Preferred College of Nursing Vocational Nursing program acknowledges the current status of its annual pass rates. To start revitalizing and to work towards getting out of the fifteen (15) to (28) below the state annual percentage rate in the NCLEX-PN, the Program Director plans to meet with the administration to seriously initiate the following:</p> <ul style="list-style-type: none"> • Active use of the full ATI Package on NCLEX-PN preparation including ATI Predictor Test starting with the graduating class. • Incorporation of NCLEX-PN type of question in all course examination to improve critical thinking and familiarity with 	
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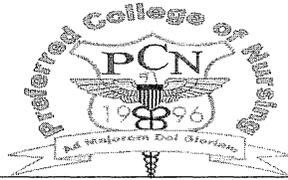
	<p>prioritization, delegation, and utilization of the nursing process.</p> <ul style="list-style-type: none"> • Actively implement the currently identified policy and procedure of screening, selection, and admission of students (for future admission). • Actively implement the currently identified policy and procedure of tutorial, remediation, and probation. • Actively implement identification of at-risk students early in their modular instruction and perform an active tutoring sessions as designed by the Program Director (Both Mandatory and Voluntary attendance to every Saturday NCLEX-PN "Pathway to Student Success in NCLEX-PN Session" and course specific tutoring needs to be assigned to specific faculty member. • Students will be provided with concepts on time management, 	
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	<p>effective studying and note taking, test-taking strategies, concept mapping for critical thinking during the “Pathway to Student Success in NCLEX-PN Session.”</p> <ul style="list-style-type: none"> • Conduct an in-service training with the faculty on curriculum evaluation to include curriculum mapping of current NCLEX-PN test plan into the existing Instructional Plan/Curriculum. • Conduct an in-service among faculty on aligning of course learning outcome between the didactic instruction and clinical instruction. • Conduct in-service on lesson planning and student assessment. • Long-term plan of restricting the current “Instructional Plan” to reflect the current changes in the healthcare industry, align the instructional plan with the current NCLEX-PN test plan and to become responsive to the 	
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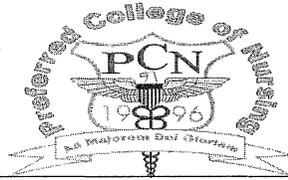
	<p>changing needs of the nursing profession.</p> <ul style="list-style-type: none"> • Create a “ Pathway to Success Towards NCLEX-PN” among previous graduates who has not taken the NCLEX-PN through comprehensive tracking and creating a “Graduates Connection Program” through the help of support staff. 	
<p>Violation # 14</p> <p>Section 2533 (a) of the Vocational Nursing Rules and Regulations states:</p> <p>“ Vocational nursing programs shall include theory and correlated clinical experience.”</p>	<p>Violation # 14</p> <p>The Board – approved curriculum includes theory and correlated clinical experience. However, observation and analysis of reported clinical rotations confirms that the program failed to provide clinical experience that correlates with presented didactic content in Maternity Nursing for the enrolled population. Students receiving didactic instructions in Maternity Nursing at the time of the survey visit were assigned clinical experiences in adult skilled nursing facilities. According to the director and an</p>	<p>Appendix F.</p> <p>Current Letter of Request to Rotate for Maternity and Pediatric clinical experience for Dr. Latiff’s Clinic and Sun Valley Specialty Healthcare.</p>



instructor, the program lacks clinical sites that will provide clinical experience in Maternity for the enrolled students.

Response (Corrective Action).

Preferred College of Nursing Van Nuys, Vocational Nursing Program acknowledges the placement of enrolled students in adult skilled nursing facilities during the time of the survey. The program actively sought an alternative Maternity facility for Maternity rotation for those students who were supposed to rotate in a Maternity rotation during the survey. Seeking clinical rotation in a maternity clinic was due to the absence of acute maternity facility allowing rotation for NV students. With an active support from the NEC, the program was able to get an approval for a Maternity clinical. The clinical objectives were also modified for Maternity nursing to reflect the appropriate learning experience the students can obtain from

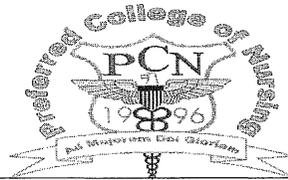


	<p>the Maternity Clinic. The Program Director was able to motivate and convince the seven students of returning to clinical to complete their missed clinical experience in Maternity. Due to the scheduling within the clinic, the program has to be creative with scheduling the seven students who were to rotate for maternity. The clinical instructors provided the necessary instructional session together with the clinic staff during the time the students were not seeing client due to the time of the obstetrician. Currently, all seven students were able to complete the needed forty-eight (48) Maternity clinical hours required within the approved curriculum. All seven students were very satisfied with their previous maternity clinical experience as reflected in their clinical evaluation. All seven students were able to not only assist the obstetrician but also participated in a hand-on preparation of setting up patient for procedures, assisted the obstetrician in performing procedures such as Pap smear,</p>	
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performed measuring fundal height, EDC, observed physical sign and symptoms of a pregnant client, FHR monitoring using fetoscope and participated in gathering of data, and performed proper documentation related to maternity situation. Because the students are full time, they were able to saturate the time the maternity clinic is open which helped in obtaining the required number of clinical hours.

Likewise, towards the end of January 2015, the PCN Director was able to speak with the Education Director of Sun Valley Specialty Healthcare (formerly Totally Kids) for PCN seven students' Pediatric rotation as well as ensuing students. On February 2, 2015, PCN Program Director received an email from the Education Director of Sun Valley Specialty Healthcare that the seven students can orient by February 9 provided all clinical documentations are complete. and can start rotating by February 10. However, the program was given only Tuesdays 3pm-11pm



	<p>slot within the facility. The seven students had their orientation and currently rotating at Sun Valley Specialty Healthcare until March 17, 2015. This would be their last day of clinical and they are considered complete with their requirements. Likewise, the second cohort is tentatively scheduled to orient for their pediatric rotation on March 23, 2015 and may end May 26, 2015. This arrangement of clinical rotation ensures that all students received their didactic instruction prior to clinical exposure and within the 18-22 months period for part-time scheduled program.</p>	
<p>Violation # 15</p> <p>Section 2882 of the Vocational Nursing Rules and Regulations states:</p> <p>“ The course of instruction of an approved school of vocational nursing shall consist of not less than the</p>	<p>Violation # 15</p> <p>As noted on violation # 14, analysis of documents and information provided by the program and reported representatives of identified clinical facilities confirms that the program lacks adequate clinical facilities providing experience in maternity Nursing for enrolled students.</p>	



<p>required number of hours of instruction in such subjects as board may from time to time by regulation determine, together with the required number of hours in the care of medical, surgical, obstetrical patients, sick children, and such other clinical experience as from time to time may be determine by the board.</p> <p>Section 2534 (b) of the Vocational Nursing Rules and Regulations states:</p> <p>“ 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</p>	<p>Additionally, Board representatives observed that clinical objectives were not posted on the nursing unit of a clinical facility to which students are assigned. As identified by the director and the clinical instructor, student assignments are based on need of the facility rather than the clinical objectives the students are expected to accomplish. Students interviewed in the last term of the program at the clinical site reported they had not performed task commonly included in basic practice such as catheter insertion and suctioning.</p> <p>Response (Corrective Action):</p> <p>All violations incurred by the program to include clinical concerns such as none posting of clinical objectives and not using the “Instructional Plan” as a source of learning objectives/lesson plan for the specific clinical rotation were addressed and discussed among</p>	
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<p>adequate daily census of patients to afford variety of clinical experiences consistent with competency-based objectives and theory being -taught. Clinical objectives which students are expected to master shall be posted on patient care units unit utilized for clinical experience.</p>	<p>the members of the faculty during the January 10, 2015 Faculty Meeting.</p> <p>To strengthen clinical instructions among PCN Faculty, this Program Director plan to do an in-service about “What Do I Really Need to Know When teaching Nursing Students in the Practicum Setting?”</p> <p>To date, the program utilizes one Maternity clinic which clinic schedule may consider adequate for small number of students but may not for a group of full size clinical instruction (20 or more). However, based on the evaluation of the facility, the students rated their experience more than adequate and considered the clinic very appropriate for their needed experience. In addition, the program is currently active seeking more Maternity Clinics that has a larger census status to ensure adequate variety of cases in Maternity nursing.</p>	
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	<p>Currently, PCN Van Nuys, VN program is back at Sun Valley Specialty Healthcare which has 48 patient beds and with types of patients ranging from children and adolescents requiring maintenance care to ill patients requiring close monitoring and higher level of nursing care (e.g. close monitoring of fluctuating condition, on ventilator monitoring, catheterization, and suctioning etc.). This Program Director will closely supervise the faculty to actively engage the students in hand-on experience with the facilitation form the facility's Education Director to be able to provide the students with the much needed experience.</p>	
<p>Violation # 16</p> <p>Section 2534 of the Vocational Nursing Rules and Regulations states:</p> <p>“ Schools are responsible for the continuous review of clinical facilities to</p>	<p>Violation # 16</p> <p>As noted in Violation # 3, program representatives failed to produce documentation substantiating the evaluation of clinical facilities.</p> <p>Response (Corrective Action):</p>	<p>See Appendix C. Please see attachment.</p>



<p>determine if the student's clinical objectives for each facility are being met"</p>	<p>Currently, the Program Director is actively collaborating with the Education Director of the facility (e.g. Sun Valley Specialty Healthcare) and faculty assigned to each of the four (4) actively participating facilities the Program is utilizing. New faculty evaluation form for externship experience survey was created to ensure that the facility is appropriate for the learning objectives of the program. The Program Director is also scheduled to do clinical visits to all four facilities. Evaluation of the student and faculty of the current facility is attached herewith see Appendix</p>	
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End/SRarang March 1, 2015

Agenda Item #16.C.4., Attachment D.



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Below are essential components identified as factors that impact Preferred College of Nursing - Van Nuys Vocational Nursing Program's ability to educate students and to move successfully and directly into a role of Licensed Vocational Nurses as required by the Board of Vocational Nursing and Psychiatric Technicians (BVNPT).

Area/Factors Negatively Impact student Achievement	Actions To Improve Pass Rate	Dates of Implementation	Effects of Employed Intervention	Resources Required for Achievement of Program Objectives
<p>ADMISSION CRITERIA/SCREENING and SELECTION CRITERIA</p> <p>Robust selection of candidates for the program.</p>	<p>The program is currently implementing a highly selective screening, selection, and admission criteria. The implementation of highly selective screening criteria by having any candidate obtain an eighty percent (80%) minimum passing score for the entrance</p>	<p>A highly selective standard for screening, selection, and admission is embodied in the current program's policy and procedure regarding screening, selection, and admission of students to the program. However, pending implementation is observed until a full approval from the Board concerning opening a new class is received.</p>	<p>Will improve the quality of admitted students in the in the program in the future (pending full Board approval).</p>	<p>Strict compliance of the policy and procedure among admission coordinator and all personnel involve in the screening, selection, and admission process. Use the existing rubric for the essay. Use the existing criteria for panel interview.</p>

<p>Rigorous process of screening. Requires the mandatory showing of evidence regarding high school graduation or its equivalency (completing a 12th grade) among candidates.</p>	<p>examination to qualify as well as passing both panel interview performed by the Director and Assistant Director of the VN Program and an essay to state goals of entering the vocational nursing career which may improve the quality of students entering the program in the future.</p> <p>Future candidates are required to show original documents for proof of completing secondary education (high school from an accredited high school or its equivalency) prior to qualifying for the screening activity of the program.</p>	<p>This standard for screening, selection, and admission is embodied in the current program's policy and procedure. However, pending implementation is observed until a full approval from the Board concerning opening a new class is received.</p>	<p>Will improve the quality of admitted students in the program in the future (pending full Board approval).</p>	<p>A rigorous checking process to include verification of the documents submitted by the candidate to include calling the institution where the student graduated or completed his/her secondary education or its equivalency by the admission coordinator.</p>
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<p>INSTRUCTIONAL PLAN</p> <p>There is a need to review the current program's Instructional Plan (IP) for its update and alignment with the current NCLEX-PN® Test Plan</p>	<p>The Director of Nursing, Assistant Director of Nursing and all the Lead Faculty for each course (module) are to meet to review the Instructional Plan and perform a curriculum mapping of the current IP with the</p>	<p>Second Quarter of School Year 2015 (April-June 2015).</p>	<p>Will align the instruction with the current NCLEX-PN Test Plan.</p>	<p>Current approved Program's Instructional Plan Current NCLEX-PN® Test Plan Current Textbooks Lesson Plans VN Program current Faculty Members</p>

	current NCLEX-PN® Test Plan prior to staging a needed revision.			
<p>CLINICAL OBJECTIVES FOR EACH COURSE</p> <p>There is a need for ongoing monitoring of the implementation (reviewing, following, posting, and coordinating the daily clinical objectives based on the existing IP among Clinical Instructors with the VN program's students and to the Clinical facility nursing staff).</p>	<p>The Director of Nursing, Assistant Director of Nursing and all clinical faculty for each course (module) are to meet to review the Instructional Plan and perform an In-service on “What Do I Really Need to Know When teaching Nursing Students in the Practicum Setting?” This in-service will highlight the importance of setting clinical objectives based on approved IP and being creative in ability to meet those objectives.</p>	<p>Second Quarter of School Year 2015 (April-June 2015).</p>	<p>Improve the teaching practices in the clinical setting among members of the faculty.</p>	<p>Facilitator and modules for the In-service</p>
FACULTY		School Year 2015		



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<p>Faculty Development</p> <p>Faculty Teaching Competency</p>	<p>Faculty will require to attend trainings and seminars on active learning and teaching methodologies, how to teach using “Flipping the Classroom” teaching methodology, and in-service faculty on curriculum mapping with NCLEX-PN® Test Plan, and learning assessment.</p>		<p>Improve the teaching competency of individual faculty member.</p>	<p>Faculty to attend to seminars and trainings regarding active learning and teaching strategies. Enroll faculty on ATI Academy.</p>
<p>INSTRUCTION</p> <p>Revision of Instructional Plan</p>	<p>The Director of Nursing, Assistant Director of Nursing and Members of the faculty to meet for a retreat to review the</p>	<p>School Year 2015</p>	<p>Updated Instructional Plan that is based on assessment of members of the faculty concerning the learning needs of the students. Will improve</p>	<p>Retreat Instructor Textbook Instructional Plan copy</p>

	Instructional Plan and form a task force to revise the Instructional Plan to address current trends in vocational nursing practice		understanding of faculty of the instructional plan that makes them expert of the courses they teach.	
ACADEMIC ADVISING, COUNSELING, and TUTORING	Assign faculty members that will assist student with their advising and tutorial needs on regular basis. Create a schedule for open tutorial session and do proper documentation of tutoring provided. Tutorial will include both theory and clinical	School Year 2015 and ongoing.	Improve learning of students and student satisfaction of the program. More structured and focus study routines among students	Instructor Clinical Instructional Plan Textbook NCLEX-PN Practice Questions Skills Laboratory
NCLEX-PN Passing Rate	Continue to provide intensive NCLEX-PN in-house review and use ATI Proctored Predictor Exit Exam to determine	School Year 2015 and ongoing.	Improvement in NCLEX-PN passing rate of the program.	NCLEX-PN pool questions NCLEX-PN Review materials ATI package including ATI Proctored Predictor Exam



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	readiness for the board examination		Provide Batch # 42 an intensive 8 weeks once a week NCLEX-Review (Pathway to Success Series) with take home study materials and use of ATI Predictor test post NCLEX-PN review	
CLINICAL FACILITIES FOR MATERNITY	<p>Assign program coordinator to actively pursue obtaining more maternity clinical facilities (Clinic) to improve maternity clinical experience.</p> <p>Look into making contract with certified simulation centers within Los Angeles</p>	School Year 2015 and ongoing.	Improvement in maternity nursing clinical experience.	Program clinical coordinator Maternity clinics (Doctor's Offices) and maternity lying-in clinics. Birthing Clinics.

	area that provides maternity nursing experience.				
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end



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March 13, 2015

Agenda Item #16.C.4., Attachment E

HISTORICAL PERSPECTIVE

Preferred College of Nursing (PCN) Van Nuys was approved to begin a vocational nursing program on May 11, 2001 with an initial class of 20 students. The Board of Vocational Nursing and Psychiatric Technicians (BVNPT) approved the program curriculum for 1550 hours, including a 590 theory hours and 960 clinical hours. BVNPT representatives conducted an unannounced program survey visit in consideration with its provisional status, which will expire by May 31, 2016. The visit resulted in a total of sixteen (16) violations. On November 19, 2014, the BVNPT sent to the program the Notice of Violations. The BVNPT required the program to submit corrective actions of those mentioned violations based on California Code of Regulations/Vocational Nursing Rules and Regulations. On December 15, 2014, PCN submitted to BVNPT its response. On December 29, PCN was approved of its new Program Director. On January 13, 2015 Board Meeting, PCN was included in the agenda. Recommendations were listed in response to the school's reconsideration of provisional approval status based on Report of Unannounced Survey Visit. On February 18, 2015, PCN Program Director and BVNPT Nurse Education Consultant had a phone conversation concerning the recommendations from the BVNPT of the remaining uncorrected violations. Discussion of the remaining violations, corrective actions performed, and evidence of correction are presented in this document.

CURRENT INFORMATION

In August 2015, a new Program Director, Elizabeth Estrada, MSN, RN was approved. It was decided, in light of the frequent DON changes, that the previous violations be reviewed to ensure that a sustainable strategy be adopted for establishing a viable program that provides the quality education that the students deserve. Preferred Nursing College-Van Nuys hereby request to be on the November BVNPT agenda to submit the **request for a new cohort to start on January 11, 2016 with a planned graduation date of January 30, 2017.**

Thus, the following summary points are emphasized as initial information that PCN requests the board to be aware of:

- 1) Although PCN other campuses have been closed, the board is asked to review information with an **objective point of view** not utilizing information from formerly closed PCN campuses weigh into the present circumstance. PCN-Van Nuys campus is now being managed and operated with **new leadership**. PCN-Van Nuys was operating successfully at one time with over 100 students being educated at any given time.(this included other health science courses) When it was operating successfully, the owner/operator was a nurse who subsequently went through period of cancer treatment and then passed away. **over the last several years, have tried to unsuccessfully continued legacy without the experience, finance, and knowledge to continue the success.**
- 2) New investors are in the process of **executing their option to purchase PCN**. Their financial statements and experience in business has been established. The last item that will trigger purchase is the approval from the BVNPT of a new cohort. This would provide the necessary platform for the investment in a new future for the college.
- 3) **New Program Director** has solid experience with improving the policies, curriculum, staffing, and pass rates at another BVNPT approved college. She has been Assistant Director of Nursing for American Career College for two years and then Director of Nursing at Infotech Career College for the last four years. At Infotech Career College (two hours drive both ways to work), she had been able to improve the pass rate from minus 17 points below state average to a 2014 year average pass rate of 80%.

4) The **current pass rate** for PCN-Van Nuys is slowly going up. Preferred College of Nursing obtained 77.78% for the second quarter of 2015, eight (8) percentage points above the state pass rate for first-time program candidates and six (6) percentage points above the state average annual pass rate.

REQUEST:

We humbly request that we receive approval for a new cohort of 20.

Details, documents of evidence, and corrective actions follow this summary. The following is a brief outline of violations addressed:

1. School not using instructional plan – Instructional Plan is being followed.
2. Evaluation of curriculum – completed
3. Clinical facility evaluations – completed
4. Documentation of score for school created entrance exam- completed
5. List of resources, provision for counseling and tutoring services – attached list of resources provided and tutoring system being offered
6. Failure to notify Board for termination of program faculty—updated in this report
7. Lack of sufficient resources and physical environment inadequate – details of updates included
8. Instructional plan available to all faculty – completed
9. Two student files with no high school completion or equivalency – addressed
10. Inadequate remediation of failing grades – probation, termination, and appeal procedures implemented
11. Right to contact board is in student handbook
12. List of Board approved clinical facilities not posted in student handbook nor posted on site – update and status report included here
13. The average annual pass rate has been more than ten percentage points below state – pass rate slowly increasing, Hesi testing utilized, NCLEX prep course currently being provided
14. No clinical experience in Maternity or pediatrics – Pediatric clinical rotation is current and Maternity clinical experience submitted
15. Sufficient clinical facilities must be provided, Clinical objectives not posted in clinical site – Sufficient clinical facilities secured, policy that instructors must post these objectives and spot checks will be instituted
16. No documentation of clinical facilities evaluation – attached herein

Thank you for your kind consideration of PCN-Van Nuys request for a new cohort.

**PCN Van Nuys, Vocational Nursing Program
Response to Violations as Identified during Unannounced Survey Visit**

Violation # 1

Section 2526 (a) (7) of the Vocational Nursing Rules and Regulations states:
" The institution shall apply to the Board for approval. Written documentation shall be prepared by the director and shall include:(7) Instructional Plan.

BVNPT comments:

Analysis of the documents provided by the program during the survey visit and interviews with an instructor and the director **evidenced the program's failure to provide instruction consistent with the Board - approved instructional plan.**

Response (Corrective Action):

The PCN - Van Nuys utilized only one "Instructional Plan" since its approval in May 2001. Part of this Instructional Plan was submitted to BVNPT in 2000 during the program's development process and then parts of it were updated in 2001 based on the recommendations then by the supervising NEC. Likewise, part of the Instructional Plan was revised in 2006 (Urinary System). Hence, parts of the Instructional Plan indicated the original date 2000 while the subsequent parts were dated 2001 as well as 2006. The program officially started on May 11, 2001. This current "Instructional Plan" that the program utilized was reviewed and presented to the members of the faculty. As an attestation that the current "Instructional Plan" has been presented, reviewed, and being utilized by the members of the PCN VN program faculty members.

Updated Comments from New Program Director:

The current cohort in their Term 5 is utilizing the approved Instructional Plan.

Violation # 2

Section 2526 (a) (8) of the Vocational Nursing Rules and Regulations states:

"The institution shall apply for the Board approval. Written documentation shall be prepared by the director and shall include:

.... (8) Evaluation methodology for the curriculum.

BVNPT comments:

Board files confirm that the program has a methodology and procedure for evaluation of the curriculum. However, the program representatives failed to produce documentation substantiating that the curriculum had been evaluated to determine its currency, effectiveness, consistency with the NCLEX-PN® test plan, or the need for revision. Further, the director verified that the curriculum was not evaluated and she requested help in understanding how to evaluate a curriculum.

Correction Response:

PCN Vocational Nursing Program has an evaluation method in place for its VN Program curriculum evaluation. The evaluation of the VN program curriculum includes examining the program curricular components to measure success of the program, establish benchmarks, and continually improving the quality of the program. For the PCN Van Nuys Vocational Nursing Program, the criteria being used in evaluating its curriculum includes examining the appropriateness, effectiveness, and applicability to the current societal/stakeholders needs of the following components:

- Philosophy of the program
- Overall purpose the program and Program Terminal Objectives
- Implementation Plan
- Enrollment trends/ Retention/and Attrition rates of the students in the program.
- Achievement: NCLEX-PN Passing Rate and Graduation Rate
- Alumni Milieu
- Administrators, Faculty, Staff

Program curriculum evaluation will be conducted yearly towards the end of each year. Using the Educational Program Assessment Questionnaire and other components such as enrollment trend, students current and completed the program as well as current NCLEX-PN® Licensure examination Data.

Updated Response by the New Program Director (Elizabeth Estrada, RN, MSN)

Date: September 12, 2015

The new program director plans on completing a curriculum assessment and report to the board the results of the evaluation. The college has an Educational Program Assessment questionnaire that will be utilized to get input from faculty. A curriculum committee has been developed to review the curriculum, courses offered, and student success outcomes for potential future revision in the coming years.

Violation # 3

Section 2526 (a) (11) of the Vocational Nursing Rules and Regulations states:

"The institution shall apply to the Board for approval. Written documentation shall be prepared by the director and shall include: ...(11) Evaluation methodology for **Clinical Facilities**.

BVNPT comments:

Board files confirm that the program has a methodology and procedure for evaluation of clinical facilities. Program representatives failed to produce documentation substantiating that clinical facilities had been evaluated. There were some examples of students evaluating some of the clinical facilities. However, there was no indication of follow-up with the concerns expressed by the students.

Response (Corrective Action):

Currently, Preferred College Nursing Vocational Nursing Program employs dual evaluation process for current clinical facilities. One that is based on students' evaluation and evaluation by the school through the clinical faculty. **The evaluation of clinical facilities is being performed at the end of each clinical course module or rotation** (e.g. Maternity Nursing Module, Medical-Surgical Module - Urinary System Module). Attached are the current evaluation performed by the students and clinical faculty for the currently used and existing clinical facilities for the PCN VN program:

- Dr. Latiff's Maternity Clinic Evaluation by students and faculty.
- Canyon Oaks Nursing and Rehabilitation Center Faculty Evaluation. Student's evaluation to follow.

Facility Evaluation on the process.

- Goldstar Healthcare evaluation will be performed when the students completed their module as well as faculty evaluation and Director evaluation to ensue.
- Facility evaluation for Sun Valley Specialty Healthcare (Formerly Totally Kids Specialty Healthcare) to be performed when the students completed their pediatric rotation/module as well as faculty evaluation and Director evaluation to ensue.

The plan with regards to Facility Evaluation is for the Director of the VN Program to closely monitor all current facility being used as well as future ones to address the issue of facility's appropriateness and effectiveness towards students' learning. It is the goal of the program to reinvigorate the evaluation process of clinical facilities by closely working with the Program Clinical Coordinator and members of the Faculty to ensure that an optimum learning experience of current and future students is ensured. A newly created survey tool will be used for this purpose. A clinical site viability evaluation form is used by faculty. Several of these reports have been reviewed by the new DON and available to BVNPT on request. The Program Director will analyze the evaluation result and will make proposal or modifications that will be addressed towards the clinical facility representative and the collaborating clinical faculty.

**Updated Response by the New Program Director (Elizabeth Estrada, RN, MSN) Date:
September 12, 2015**

New Director plans to visit all clinical rotation sites to meet the management and establish a working relationship with facility. Periodic clinical site visit by the DON will have several goals: to provide training follow-up; monitor and evaluate the implementation of the school's clinical program; assess the viability of the training the students have received from the approved clinical facilities; and provide feedback with suggestions on how to address issues or concern identified during the visit.

The visit will include:

- a. Observation to get familiar with the operations of the facility
- b. Evaluation of clinical experience of students and their clinical instructor.
- c. Meeting with the Director of Nursing, supervisor, or with some of the available staff, to conduct interviews to get their assessment, opinions, and comments as these relate to the performance and behavior of student-nurses and clinical instructor,
- d. If permitted, meeting with the some of the clients to get another perspective on the care and services provided by the students such as communication skills, relationship, and attitude.
- e. Conducting clinical site viability evaluation to ensure that a viable environment exists for an effective learning experience and provides an opportunity for students to demonstrate required competencies.

The Program Director has reviewed recent summary of clinical facility evaluations done by students. (copies can be provided on request). Some collected students' comments (verbatim) are as follows:

Canyon Oaks Healthcare:

1. "Interaction with patients was great."
2. "Supervisor has a positive attitude, all worked well with the students."
3. "I learn a lot"
4. "Teach according to the subjects covered in clinicals."
5. "Get hands-on as much as allowed"
6. "Prepare students o subject matter and have discussion on subject matter"
7. "The school prepared us, as well as educate us about the externship."
8. "Our teacher let us with her supervision to interact with patients she makes sure we rotate, treatment, medication passing, etc."
9. "I am very happy and satisfy with the externship the way it is now."

Woodland Hills:

1. "Everything was good in facility."
2. "Facilities should allow more hands on with patient."
3. "I believe that students should be allow to handle patient more than just looking at chart and passing medication."

Violation # 4

Section 2526 (a) (13) of the Vocational Nursing Rules and Regulations states:
"The institution shall apply to the Board for approval. Written documentation shall be prepared by the director and shall include:
...(13) Screening and selection criteria

BVNPT comments:

The program was requested to complete the following by December 15, 2014:

1. Provide a plan for correction that describes how the program will follow the policy for screening and selection of applicants to the program.
2. Provide verification of training, of all individuals associated with the school, regarding admission, screening and selection policies.

Response (Corrective Action):

Currently PCN has an existing procedure of screening and selecting candidates for the program. The screening and selection criteria are reflected in the school's catalog. The current Program Director will oversee the overall implementation of the screening and selection process. The Program Director will also supervise, advise, and guide the admission coordinator in performing the screening and selection procedure as well as coordinate the other members of the screening and selection panel. Any applicant will undergo a thorough screening process by requiring the following information:

- *Graduation from an accredited high school or GED equivalents in U.S. or Official transcript evaluation.*
- *Minimum of 17 years of age.*
- *Must Possess Social Security or Tax I.D. number.*
- *Must arrange an appointment with the Admission Coordinator who will confirm that eligibility requirements have been met and will issue a permit to take the entrance test.*
- *Passing score of 80% in the Entrance Exam.*
- Furthermore, the student candidate will undergo/submit:

1. Two (2) letters of recommendation required on the day of interview.
2. Completed application and all eligibility requirements reviewed and verified by the Program Director; and
2. Interview conducted by a panel composed of the Program Director, Assistant Program Director.

Attached is the procedure of screening and selection and the qualifications of the individuals involved with the admission, screening, and selection process.

Updated Response by the New Program Director (Elizabeth Estrada, RN, MSN)

Date: September 12, 2015

Under the supervision of the new Program Director, the Admissions Coordinator shall

employ strict admission requirements and selection procedures so that those applicants who are deemed best qualified to succeed in the program may be selected.

In order to be considered for enrollment, the student must provide documented evidence of the following:

1. Graduation from an accredited high school or GED equivalents in U.S. or Official transcript evaluation.
2. Social Security or Tax I.D. number.
3. Passing score of 80% in the Entrance Exam.

After eligibility is confirmed by the Admissions Director, the applicant will undergo interview with the Program Director to determine communication skills, personality and behavior, and degree of motivation and enthusiasm to finish the program.

Once all completed applications and transcripts have been received, each application along with the entrance test result and transcripts will be reviewed.

The Admissions Committee which is composed of the Program Director and the Admissions Coordinator seeks to admit only highly motivated individuals who are willing to bring their personal values, backgrounds, experiences and interests to the program and those applicants who are deemed best qualified to succeed in their chosen career.

The New Program Director is satisfied with the Admissions Criteria Checklist now being utilized.

Recently an Admissions Personnel Training Workshop was completed on September 4, 2015 and was attended by four staff personnel.

Violation #5

Section 2526 (a)(16)

"The institution shall apply to the Board for approval. Written documentation shall be prepared by the director and shall include:

BVNPT comments:

No list of resources was found on campus or in the School Catalog. The Students Catalog describes an Office of Student Services. The Student Catalog further state: Counseling and Advising Services - where students obtain help with educational career, and personal concerns from a trained staff of counselors, specialist, and advisors. "The director confirmed that no licensed or trained specialist are on the staff. No List of outside resources for ether tutoring or counseling is offered to students."

Response (Corrective Action)

The following page entitled "Counseling and Advising Services" will be added to the Student Handbook and posted on student billboard.



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Counseling and Advising Services

San Fernando Valley Counseling Center: mental health counseling
818 341-1111
8350 Reseda Blvd.
Northridge, Ca.

The Homework Gym: Mathematics, English, Reading skills tutoring
12749 Ventura Blvd.
Studio City, CA
818 761-4898

NCLEX Review

Computer Lab, with over 30 ATI Skills Modules, available during class hours and for remote learning
Diabetes
Ambulation, Transferring, and Range of Motion
Infection Control
Maternal-Newborn
Medication Administration

Los Angeles County Department of Health-North Hollywood-vaccinations, STD, chest x-rays, minor health problems
5300 Tujunga Ave
North Hollywood, Ca.
818 766-3982

Bet Zedek Legal Services-Free legal advice for low income citizens
3250 Wilshire Blvd. #13
Los Angeles, Ca 90010
323-939-0506

Violation #6

Section 2527

"A school shall report to the Board within 10 days of the termination of a faculty member"

BVNPT Comments:

Board representatives examined all files of current faculty at the school. The program reports utilizing twenty-two part-time faculty. The 2014 Annual Report lists three faculty members who are no longer teaching in the program. The program has failed to notify the **Board of the termination of program faculty as prescribed by regulation.**

Response (Corrective Action)

The school has not had any faculty officially terminated within the past twelve (12) months. However, changes in faculty's persona schedule or other circumstances results in the program management placing them on a "non-regular rotation status."

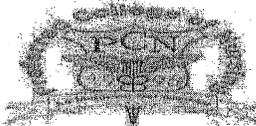
We acknowledge that we have not reported any of these changes in the faculty status as required by the Board. But effective immediately, we will be reporting any inactivity of our faculty members no longer than 12 (months).

A per the Required Action, below is the list of faculty members that have been placed on a "non-regular rotation status" and has not been active within the past (12) months showing their last recorded day of attendance:

Updated Response by the New Program Director (Elizabeth Estrada, RN, MSN)

Date: September 12, 2015

Please see following pages for the List of Faculty That Have Been in Inactive Status With Their Last Recorded Day of Attendance. And a current list of faculty employed.



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FACULTY	Last Recorded Attendance
1. Bosano, Ritchie	September 6, 2013
2. Colley, Joffe	October 14, 2013
3. Dator, Ramela	July 26, 2013
4. Dy Buco, April Gayle	November 30, 2013
5. Mariano, Leonilo	August 17, 2013
6. Omega, Michael	December 6, 2013
7. Pedram, Parivash	November 22, 2013
8. Pinada, Peter	November 30, 2013
9. Villanueva, Efren	December 7, 2013
10.	

As per the "Required Action" below is the list of current faculty and assignments through the completion of all currently enrolled students:

FACULTY	Assignment/Rotation
1. Balaoing, James	Theory -- Medical/Surgical
2. Blanco, Adelwisa	Theory -- Medical/Surgical
3. Bodnar, Benita	Clinical -- Medical/Surgical
4. Cariete, Edwin	Theory -- Med/Surg & all other subjects
5. Co, Irene	Clinical -- All subjects
6. Cooper, Marilyn	Theory -- Maternity/Pediatrics & other subjects
7. Garcia, Wanda	Clinical -- Med/Surg & all other subjects
8. Guray, Carlina	Theory/Clinical -- all subjects
9. Herra, Jolevelynn	Theory -- all subjects
10. Hirbawi, Steven	Theory -- Med/Surg & other subjects
11. Jarantilla, Mildred	Theory -- All nursing subjects
12. Javellana, Catalina	Theory/Clinical -- All nursing subjects
13. Lim, Alma (New)	Theory -- All nursing subjects
14. Mallilin, Elsie	Theory -- Non-nursing subjects
15. Manuel, Nida	Clinical -- All subjects
16. Ponco de Leon, Girlie	Theory -- Medical/Surgical
17. Putong, Antinina	Clinical -- All subjects
18. Rico, Hannah	Theory/Clinical -- Medical/Surgical
19. Tajolosa, Meliza	Clinical -- Medical/Surgical
20. Valdez, Aldrin	Theory -- All nursing subjects
21. Villafuerte, Arturo (New)	Theory -- Medical/Surgical

Violation # 7

Section 2530 (a) (13) of the Vocational Nursing Rules and Regulations states:

"The program shall have sufficient resources, faculty, clinical facilities, library, staff and support services, physical space, skills laboratory, and equipment to achieve the program's objectives."

BVNPT comments:

Survey observation and an analysis of staff and support services, supplies, equipment, and physical space required to accommodate the maximum or current enrollment confirmed that the program lacks sufficient resources to achieve its objective.

Correction Responses:

PCN Van Nuys VN program is currently restructuring its skills laboratory to become more functional for simulation training of its students. This begun with creating a more clinical/patient unit environment. Supplies for standard precaution (e.g. non-sterile and sterile gloves, disposable gowns, goggles, mask, disposable headgear) were asked from the administration during the last compliance meeting on February 11, 2015 to be purchased and existing supplies are restocked at the skills laboratory for proper use. A support staff was hired part-time to assist in the cleaning and maintenance of the skills laboratory.

During the compliance meeting, the administration has been requested of purchasing one low fidelity mannequin that can be used for wide-ranging types of patient care as well as a pediatric (baby mannequin) for optimal learning experience of the students especially in pediatric skills and procedures (e.g. feeding via NGT of pediatric patient, tracheal suctioning, comfort measures, etc.). This is currently under its planning stage. The school also designated a **Student Resource Center**. This center provides books, journals, periodicals, newspapers, online reference resources, CD-ROMS, videotapes, and computer workstations for online access and research and other audio-visual learning devices. Square Footage: 532 sq. ft.

Updated Response by the New Program Director (Elizabeth Estrada, RN, MSN) Date: September 12, 2015

With regards to providing the students with adequate preparation for their NCLEX-PN examination as well as improving the entire PCN students' test-taking skills, critical thinking skills, and addressing issues on specific course learning objectives. A specialist in NCLEX review is currently providing the recently graduated students a four week NCLEX review. The students have come to the new Program Director with extremely positive comments and appreciation for the caliber of review they are receiving. A formal survey evaluation of the NCLEX review will be accomplished upon completion of the review. This session is open to all students with priority on the graduating students.

The school formed a new staff scheduling to create an order and a smooth flow of school operation and student services.

These staff personnel are also tasked to supervise students seeking for the following services:

- A. Library service
- B. Skills lab supplies and equipment setting-up and preparation

C. Computer-assisted activities

Specific duties were given to the following support staff:

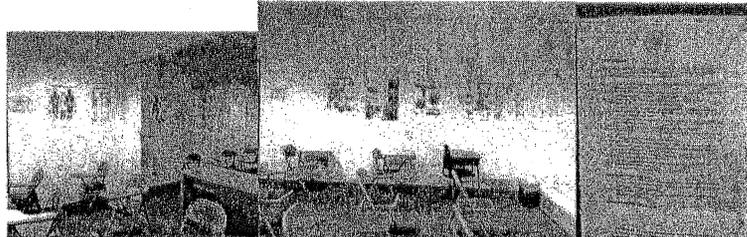
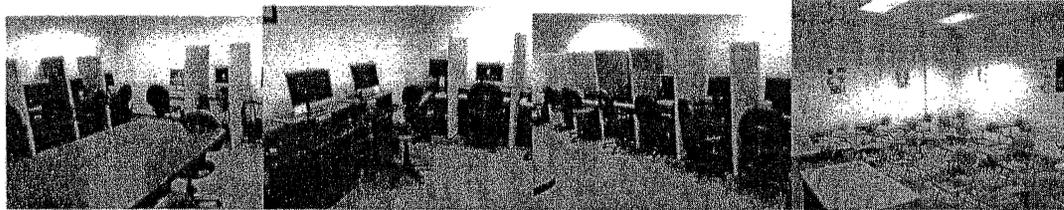
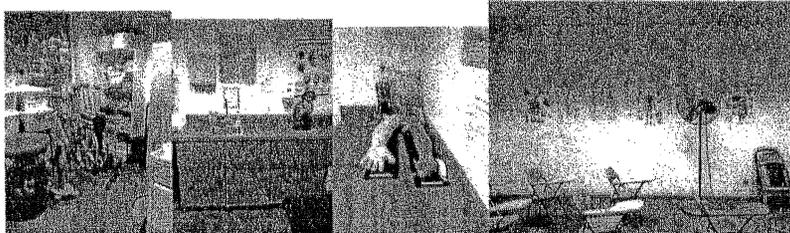
1. _____ - provides staff for clerical, communications, and other program's needs
2. _____ - assists the Program Director in the preparation of office communications, gathering information and data related to program's retention, completion, licensure exam and placement, compilation, keeping, and recording of all student files and academic documents such as grades and attendance.
3. _____ - responsible for instructor's schedule, syllabi preparation, students' theory schedule and clinical rotations. She is also tasked to assist students in remediation, tutorial services, and academic advising.

The school has completed the inventory of skills lab supplies and equipment. Some additional supplies were added such as gloves, face masks, alcohol wipes, syringes, skin prep protective pads, foley catheters, and pharmacology kits.

Facilities from floor to classrooms have been fixed and reorganized. The carpets have been steam cleaned and bathroom facilities repaired and in working order. Posters are on walls with educational content.

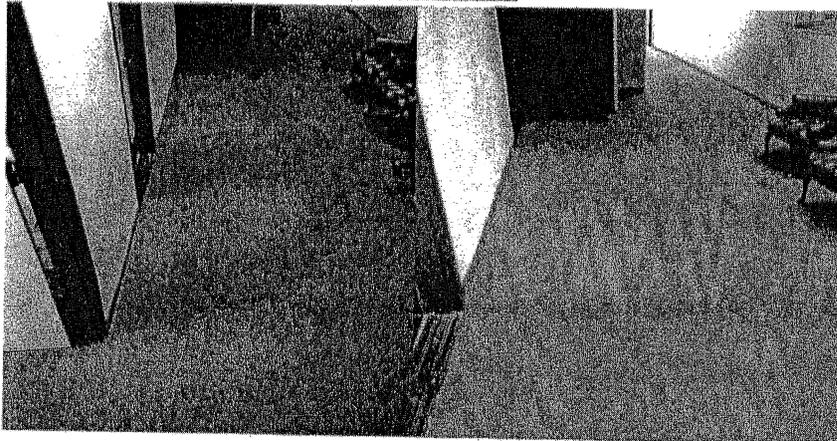
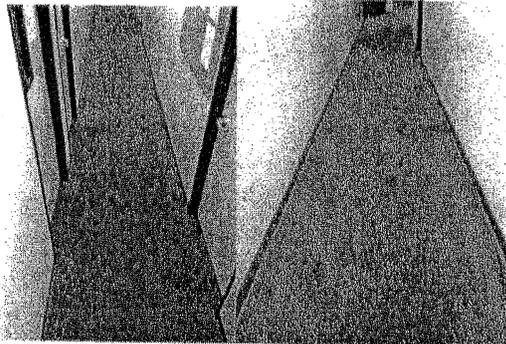
The following two pages shows current views of the classroom, hallways, and facility resources. One page is the before steamcleaning and after pictures.

RESOURCES & FACILITIES



Before

After



Violation # 8

Section 2530 (f) of the Vocational Nursing Rules and Regulations states:

"The program's instructional plan shall be available to all faculty."

BVNPT comments:

The program failed to provide an instructional plan that was available for all faculty. (See Violation # 1).

Response (Corrective Action):

The Program Director has provided all of the current faculty of PCN VN program, the opportunity to review the current and existing "Instructional Plan" as previously approved by the Board. A separate binder containing the current and existing "Instructional Plan" is placed at the instructor's office. As attestation to this, a sign-in (log) sheet was created and signed by the current faculty members to confirm their access and understanding of how and when to use the PCN Instructional Plan.

**Updated Response by the New Program Director (Elizabeth Estrada, RN, MSN) Date:
September 12, 2015**

There is on file "Acknowledgment of Receipt of VN Instructional Plan" dated 9-10-15 signed by following instructors. Antinina Putong, Irene Co

In addition, there are confirmed documents verifying receipt of the instructional plan by the following faculty members of the program on December 2, 2014 who have reviewed and understand the Instructional Plan.

1. Edwin Caniete
2. Girlie Ponce-De Leon
3. Antinina Putong
4. Marilyn Rosow-Cooper
5. Irene Co.

Violation # 9

Section 2530 (g) of the Vocational Nursing Rules and Regulations states:

"Each school shall have on file proof that each enrolled student has completed a general course of study through the 12th grade or evidence of completion of the equivalent thereof. Equivalency is determine by the Department of Education in any of the United States or by a nationally -recognized regional accrediting body."

BVNPT comments:

The program failed to have on file proof that each enrolled student has completed a general education course of study through the 12th grade or the equivalent thereof, as required. Board representatives reviewed the files of all current students and the most recent graduates. A total of two (2) student files did not contain documentation of completion of high school or equivalency.

Response (Corrective Action):

The program's NEC had a thorough conversation with the newly approved Program Director on the case of student whose file was found to be lacking the documentation of completing the 12th grade or the equivalent thereof in early January. Only one student file was noted lacking during this phone conversation. As a response, the Program Director had evaluated the submitted documents of the student. The student was interviewed by the program director and advised to provide the lacking documents within 90 days of the notification (January 23, 2015). Currently, the student is in the process of completing the lacking/missing document by enrolling in a GED program of the high school where the student last attended. Attached is the notification to the student for completion of missing requirements.

Updated Response by the New Program Director (Elizabeth Estrada, RN, MSN) Date: September 12, 2015

The identified student here was _____ ; has successfully passed the GED and is still waiting for her certificate to be mailed.

We have the results on each of her High Schools Equivalency tests:

Social Studies _____ Language Arts (includes essay) _____ Lan-
guage Arts - _____ ; Science - _____ Math - _____

All of the other students have proof of 12th grade (high school diploma) completion or its equivalent.

Violation # 10

Section 2530 (i) of the Vocational Nursing Rules and Regulations states:

“ The school shall evaluate student performance to determine the need for remediation or removal from the program.”

BVNPT comments:

Review and analysis of student files provided during the inspection confirmed that the program failed to evaluate student performance, identify deficit performance, develop a plan and timeline for remediation, or complete re-evaluations to ensure resolution of identified deficits.

Board representatives reviewed files of all current students and the most recent graduates, including the program's grade books. Gradebooks documented below minimum final grades. In some cases, there were no indications of any remediation of the failing grade. Other documentation of a remediation plan, tutoring, and subsequent follow-up to the remediation plan were not in evidence in student files or other program documents.

Response (Corrective Action):

PCN Van Nuys has the following existing policy and procedure concerning evaluation of student performance to determine the need for remediation or removal from the program. The following Satisfactory Academic Progression Policy, Academic Probation Policy, Tutorial Policy, Termination/Dismissal Policy, and Remediation Policy are reviewed with faculty to ensure that everyone involved in the student progress are on the same understanding and agreement to the execution of these policies. The official School Catalog also reflected these existing policies for students' immediate access. The newly appointed Program Director will review all existing student file together with the school record custodian to ensure that appropriate documentations are filed within each student's file starting March 2, 2015.

The current policies of PCN Vocational Nursing Program will be closely implemented under the leadership of the new Program Director as stipulated below as well as more efficient filing method to ensure all documents pertaining to student training will be included in their student file to include:

- Close supervision of the Program Director on Record Custodian performance.
- Faculty will directly submit files to the Record custodian within 24 hours post theory or clinical instruction of documents necessary to include in the student's file not limited to examination results, remediation, and/or probationary status documentations.

Satisfactory Academic Progression Policy

Federal regulations require that all schools participating in any Federal Financial Aid program must adhere to a Satisfactory Academic Progress (SAP) policy. These are the standards by which student's progress toward the completion of their program of study.

PCN measures the student's progress to determine continued eligibility for financial aid as well as success in their program.

The Director of the Program has identified this timeline as appropriate timeline of evaluating each student progress in the program. However, any difficulty or failure in each course module should be acknowledge and documented during mid-term examination by the involved faculty using an "Anecdotal Form." The "Anecdotal Form" or a "Non-compliance Form" will be used by the program to document any student's concerns in both academic and non-academic situation. An initial academic counseling and tutorial will be initiated by the involved theory faculty. A copy of academic counseling will be submitted to the Program Director and the original copy will be placed in the student's file. Likewise, clinical instruction should also immediately evaluate the student's progress every instructional session and will document any difficulty on non-meeting of learning objectives. The initial counseling and tutorial will be initiated by the involved clinical faculty and a copy of clinical counseling and plan tutorial will be submitted to the Program Director.

The original copy of the outlined counseling and tutorial will be placed in the student's file. A copy of the anecdotal form will provide the timeline as to when the student should meet a tutor/or the instructor for remediation of skills. Once the student successfully demonstrated the skill or procedure, the clinical faculty will sign-off the anecdotal report to close the case and a copy will be given to the Program Director and the original copy to the file of the student. If the academic concern or non-academic concern is not resolved within the specific faculty's authority, the faculty will defer the concern to the Program Director and the program Director will notify the student of the necessary remediation (See Tutorial and Remediation Policy below).

Tutorial Policy

If a student's grade is failing below the minimum passing grade of 75% per school policy, he/she has to make a request for and make time to attend tutorial/review session with any available instructor to be assigned by the Program Director. It is the student's responsibility to make an appointment with the instructor or the Director.

If the student does not follow this procedure, the student faces the consequences of failing a subject. If the student failed a subject for whatever reason, he/she has to follow the school's procedure for remediation.

Student's decision to undergo alternative methods of tutorial of their choice must be documented and signed by the student.

Remediation Policy

Remediation is required when a student fails to achieve a passing grade in any individual course of study. Student needing remediation must do so within the specified time. Clinical hours should be made up according the same schedule. Instructors will select the method

of remediation according to individual student's needs and focusing on clinical and/or theory objectives.

A student will be allowed to participate in a written evaluation (test) to demonstrate successful meeting of remediated subject objectives. If a student successfully demonstrates that he/she has met the course objectives by successfully passing the remediation examination (achieving a grade of 75% or above) the student's permanent record would reflect a passing score of no more than 75%. If the student fails the remediation examination (achieving a grade lower than 75%), the student will then receive whichever is the higher of the two grades (original failed grade or the remediation examination grade). The higher grade would reflect on student's transcript of records. During Terms 1 to 5, the student is allowed two (2) total remediations for each Term or one (1) failed remediation. If the student remediates for the second time, he/she will be placed on probation. If the student incurs one failed remediation, he/she will be placed on probation; any additional failing grade in a course will prompt the student's immediate termination from the Term.

The Student Academic Performance Committee or "Appeal Committee" (Program Director, Assistant Program Director, Program Clinical Coordinator, and Involved Faculty Member) reserves the right to allow the terminated student to repeat. Student to repeat only the failed subjects for the term or repeat the whole Term after a careful review and deliberation. If a student fails the course Fundamentals of Nursing after the remediation, he/she has to repeat the course on the basis of space availability and is not allowed to progress because this is a prerequisite for all succeeding nursing courses. Satisfactory academic progress standards must be maintained to ensure completion of the program within the maximum time-frame allowed (one and half times the program scheduled hours). Students who had remedial of courses are closely watched for signs of possible failure and are reminded and offered tutorial. However, if a student cannot make time to attend tutorial, the student will provide the office in writing an acceptable alternative method of assistance in improving his/her grade. Student's decision to undergo alternative method of tutorial must be documented and signed by the student.

Academic Probation Policy

If the Student remediates for the second time or if the student incurs one failed remediation in any Term of the program he/she will be placed on academic probation. Remediation will remain on the student's probationary record until student successfully demonstrates meeting of objectives in the remediated subject. Probationary status may also be initiated if a student's performance jeopardizes minimum patient care standards, or when patterns of behavior of performance interfere with a student's progress. The administration may initiate probation when the student is not meeting the theory and/or clinical objectives.

Procedures:

- Student shall be promptly informed in writing of probationary status (This student status will be documented via Anecdotal Report).

- Student placed on probation shall be counseled, according to established probationary status. The terms of the probation will be stated in writing, to include criteria for removal of probationary status.
- Student whose performance remains below minimal acceptable standards will be dismissed from the program after an interview with the Program Director.

Termination/Dismissal Policy

A student may be terminated/dismissed from the program based on the following:

- It has been concluded that all efforts of remediation of the student have been exhausted.
- The student continues to be deficient in theory and/or clinical practice despite several remediation sessions.
- The student is unable to conduct himself/herself in a professional manner in the classroom and/or clinical session.

After a maximum of two (2) remediated theory/clinical subjects in or one (1) failed remediation, the student still continues to be deficient on an additional subject either theory or clinical.

Updated Response by the New Program Director (Elizabeth Estrada, RN, MSN)

Date: September 12, 2015

Shortly after taking the position with Preferred Nursing College, the new Program Director identified major discrepancies with the monitoring, counseling, and support of students who were not meeting academic requirements for progressing from one term to another.

Records of deficiencies were not addressed as they occurred. Upon receiving the reports of a current cohort after a Reproduction course final, four students failed. Upon looking into the most recent subjects, it was clear that these students not only failed Reproduction but failed other subject finals and had attendance deficiencies that have not been made-up. It was also clear that these students had prior educational challenges through the year and need counseling and remediation.

Consequently, four students were terminated in a counseling session with the instructor and the Program Director. The students were provided with an appeal procedure by which they would commit to a certain strategy for bringing up their educational deficiencies. Each student wrote a presentation, came before the appeal committee to plead their case, answered questions about their willingness to go forward, and awaited the committee's deliberation. Some of their requests for reinstatement were very heartfelt and showed a lot of serious deliberations on the student's part. Each student was granted a re-instatement with strong requirements that they must adhere to. Any deviation from their attendance or plans for remediation will trigger an automatic termination.

Even though there were many failed tests/exams with no remediation, the Program Director strongly believes that each student should get at least one chance to make a

change even at this late date. Because the college did not identify and provide the necessary educational support along the way, the college has some responsibility in overseeing the progress of students they accept into the program. Consequently, even though it will be hard for these failing students to meet the required actions to bring their knowledge level up, this Program Director is willing to give them a chance to try and the instructors are willing to help.

An example is a student (we shall call AJR).

AJR was working 40 hours per week, absent 20 days in last year without make-up, and had a child at home. In the week after termination and before the appeal committee meeting, she stated that she finally got serious and cut down work to 20 hours. In addition to this, the appeal committee required the following: 1) Meet with designated instructor once a week for progress counseling, 2) must attend all classes without tardiness; 3) Study, remediate, and retest the three subjects that were failed.

These students will be followed carefully by instructor. Since their termination and reinstatement, the four students have been attending classes and are showing more engagement in the classroom. Their files, appeal agreements, and grade records are available for review upon request from the BVNPT.

Violation # 11

Section 2530 (j) (1)

"Each school shall advise students in writing of the following: (1) Right to contact the Board of program concerns."

BVNPT comments:

The right to contact the Board was not in evidence in the program's student handbook, nor was it posted on site.

Response (Corrective Action):

The information concerning provision of right to contact the BVNPT has been printed and placed as an addendum to the existing PCN Vocational Nursing student handbook and printed copy has been posted on campus.

The following two pages includes the notice to the students and the information in is the student handbook.

STUDENT'S RIGHT TO CONTACT THE BOARD

The BVNPT will accept for review and consideration any concerns students may have regarding school matters.

The BVNPT expects students to seek resolution of concerns through appropriate school channels before presenting a complaint regarding program concerns to Bureaus office.

Student Complaint Procedures:

1. Collect all pertinent facts
2. Document steps, which have been taken in an attempt to resolve the problem. Include in the documentation the dates of events, placed in chronological sequence.
3. Submit all information to the Executive Secretary. Upon receipt of the complaint, a staff member from the Board of Vocational Nursing and Psychiatric Technicians' office will contact the student to advise action to be taken.

Students may contact the BVNPT at Board of Vocational Nursing and Psychiatric Technicians:

2535 Capitol Oaks Drive, Suite 205, Sacramento, CA 95833

Phone: (916) 263-7800 Fax: (916) 263-7866

Web: www.bvnpt.ca.gov

(Appendix K)

State of California
BVNPT
Department of Consumer Affairs

Board's Mailing Address

Board of Vocational Nursing and Psychiatric Technicians
2535 Capitol Oaks Drive
Suite 205
Sacramento, CA 95833

Phone

(916) 263-7800

Email Address

Email: bvnpt@dca.ca.gov

Enforcement Division

To file a complaint against an LVN or PT, contact the Enforcement Division at (916) 263-7827; FAX (916) 263-7857.

LVN Examination & Licensing Division

For information and questions about applications, examinations or the status of an LVN license, contact the Examination and Licensing Division at

(916) 576-3481; FAX (916) 263-7855.

PT Examination & Licensing Division

For information and questions about applications, examinations or the status of a PT license, contact the PT Division at (916) 263-7830; FAX (916) 263-7855.

LVN or PT Scope of Practice

If you have questions about vocational nursing or psychiatric technician schools, or about the LVN or PT scope of practice, contact the Education Division at (916) 263-7843; FAX (916) 263-7866.

Violation #12

Section 2530 (j) (4)

"Each school shall advise students in writing of the following: (4) List of Board approved clinical facilities.

BVNPT comment:

A list of Board approved clinical facilities was not posted in the student handbook nor was it posted on site.

Response (Correction Action);

The program has provided the students a list of the school's approved clinical facility. (see following page)

Board-Approved Clinical Facilities for VN Program

<p>Goldstar Healthcare Center 21820 Craggy View Street Chatsworth, CA 91311 Tel. (818) 881-8233</p>	<p>Canyon Oaks Healthcare Center 22029 Saticoy Street Canoga Park, CA 91303 Tel. (818) 887-7050</p>
<p>Montrose Healthcare Center 2123 Verdugo Blvd. Montrose, CA 91020 Tel. (818) 249-3925</p>	<p>Totally Kids Specialty Healthcare 10716 La Tuna Canyon Road Sun Valley, CA 91350 Tel. (818) 381-8412</p>
<p>Dr. Latiff OB-Gyn Clinic 18250 Roscoe Blvd. Suite 330 Northridge, CA 91325 (818) 885-0061</p>	<p>Dr. Kudze Clinic 5525 Etiwanda Ave #228 Tarzana, CA 91356 Tel. (818) 342-1717</p>
<p>Dr. Bess Clinic 5901 W. Olympic Blvd. Suite 503 Los Angeles, CA 90036 Tel. (313) 934-8877</p>	

Violation # 13

Section 2530 (I) of the Vocational Nursing Rules and Regulations states:

"The Board shall maintain a yearly average minimum pass rate on the licensure examination that does not fall below 10 percentage point of the state average pass rate for the first time candidates of approved vocational nursing school for the same period."

BVNPT comments:

The program's average annual pass rate has been greater than ten (10) percentages below the state average annual rate for fifteen (15) of the twenty-five (25) quarters for which data were examined. Over the last consecutive quarters, the program's average annual pass rates have been 14-28 percentage points below state average annual pass rates.

Plan Corrective Action:

PCN Vocational Nursing program acknowledges the current status of its annual pass rates. To start revitalizing and to work towards getting out of the fifteen (15) to (28) below the state annual percentage rate in the NCLEX-PN, the Program Director plans to meet with the administration to seriously initiate the following:

- Active use of the full ATI Package on NCLEX-PN preparation including ATI Predictor Test starting with the graduating class.
- Incorporation of NCLEX-PN type of question in all course examination to improve critical thinking and familiarity with prioritization, delegation, and utilization of the nursing process.
- Actively implement the currently identified policy and procedure of screening, selection, and admission of students (for future admission).
- Actively implement the currently identified policy and procedure of tutorial, remediation, and probation.
- Actively implement identification of at-risk students early in their modular instruction and perform an active tutoring sessions as designed by the Program Director (Both Mandatory and Voluntary attendance to every Saturday NCLEX-PN "Pathway to Student Success in NCLEX-PN Session" and course specific tutoring needs to be assigned to specific faculty member.
- Students will be provided with concepts on time management, effective studying and note taking, test-taking strategies, concept mapping for critical thinking during the "Pathway to Student Success in NCLEX-PN Session."
- Conduct an in-service training with the faculty on curriculum evaluation to include curriculum mapping of current NCLEX-PN test plan into the existing Instructional Plan/Curriculum.
- Conduct an in-service among faculty on aligning of course learning outcome between the didactic instruction and clinical instruction.
- Conduct in-service on lesson planning and student assessment.

- Long-term plan of restricting the current "Instructional Plan" to reflect the current changes in the healthcare industry, align the instructional plan with the current NCLEX-PN test plan and to become responsive to the changing needs of the nursing profession.
- Create a "Pathway to Success Towards NCLEX-PN" among previous graduates who has not taken the NCLEX-PN through comprehensive tracking and creating a "Graduates Connection Program" through the help of support staff.

Updated Response by the New Program Director (Elizabeth Estrada, RN, MSN)
Date: September 12, 2015

Preferred College of Nursing obtained 77.78% for the second quarter of 2015, eight (8) percentage points above the state pass rate for first-time program candidates and six (6) percentage points above the state average annual pass rate.

The HESI system of exams and resources were used with the graduating class. This is what is being used when the new Program Director started. The most recent graduated class is undergoing NCLEX review classes and have access to both HESI, Kaplan, and ATI.

With the new cohort, the program director plans to incorporate ATI resources that will help students hone their knowledge in specific areas where they struggled from during the course of the program. Student will have immediate access to ATI practice exams, tutorials, modules, and videos, ATI proctored exams computerized testing will be given throughout the program and will incorporate students' ATI grades as part of their overall grade. The passing rate for Comprehensive Exit Exam will be increased to match with 92% predictability of passing the NCLEX.

In terms of curriculum, the Instructional Plan now included more emphasis on critical thinking with improved correlation between presented theory and clinical instruction. ATI Assessment tests will be used again. Examinations will be revised to reflect style and format of NCLEX/PN® questions and clinical simulation will be added to enhance theoretical presentation.

Violation # 14

Section 2533 (a) of the Vocational Nursing Rules and Regulations states:

" Vocational nursing programs shall include theory and correlated clinical experience."

BVNPT comments:

The Board - approved curriculum includes theory and correlated clinical experience. However, observation and analysis of reported clinical rotations confirms that the program failed to provide clinical experience that correlates with presented didactic content in Maternity Nursing for the enrolled population. Students receiving didactic instructions in Maternity Nursing at the time of the survey visit were assigned clinical experiences in adult skilled nursing facilities. According to the director and an instructor, the program lacks clinical sites that will provide clinical experience in Maternity for the enrolled students.

Response (Corrective Action).

Preferred College of Nursing Van Nuys, Vocational Nursing Program acknowledges the placement of enrolled students in adult skilled nursing facilities during the time of the survey. The program actively sought an alternative Maternity facility for Maternity rotation for those students who were supposed to rotate in a Maternity rotation during the survey. Seeking clinical rotation in a maternity clinic was due to the absence of acute maternity facility allowing rotation for NV students. With an active support from the NEC, the program was able to get an approval for a Maternity clinical. The clinical objectives were also modified for Maternity nursing to reflect the appropriate learning experience the students can obtain from the Maternity Clinic. The Program Director was able to motivate and convince the seven students of returning to clinical to complete their missed clinical experience in Maternity. Due to the scheduling within the clinic, the program has to be creative with scheduling the seven students who were to rotate for maternity. The clinical instructors provided the necessary instructional session together with the clinic staff during the time the students were not seeing client due to the time of the obstetrician. Currently, all seven students were able to complete the needed forty-eight (48). Maternity clinical hours required within the approved curriculum. All seven students were very satisfied with their previous maternity clinical experience as reflected in their clinical evaluation. All seven students were able to not only assist the obstetrician but also participated in a hand-on preparation of setting up patient for procedures, assisted the obstetrician in performing procedures such as Pap smear, performed measuring fundal height, EDC, observed physical sign and symptoms of a pregnant client, FHR monitoring using fetoscope and participated in gathering of data, and performed proper documentation related to maternity situation. Because the students are full time, they were able to saturate the time the maternity clinic is open which helped in obtaining the required number of clinical hours.

en students' Pediatric rotation as well as ensuing students. On February 2, 2015, PCN Program Director received a an email from the Education Director of Sun Valley Specialty Healthcare that the seven students can orient by February 9 provided all clinical documentations are complete. and can start rotating by February 10. However, the program was given only Tuesdays 3pm-11pm slot within the facility. The seven students had their orientation and currently rotating at Sun Valley Specialty Healthcare until March 17, 2015. This would be their last day of clinical and they are considered complete with their requirements. Likewise, the second cohort is tentatively scheduled to orient for their pediatric rotation on March 23, 2015 and may end May 26, 2015. This arrangement of clinical rotation ensures that all students received their didactive instruction prior to clinical exposure and within the 18-22 months period for part-time scheduled program.

Updated Response by the New Program Director (Elizabeth Estrada, RN, MSN)
Date: September 12, 2015

There is difficulty in obtaining good maternity clinical sites. However, the college has had a lot of progress in the last month. We have sufficient clinical site rotations for the current cohort. We anticipate enough facilities available for the next cohort. In addition to those recently submitted for review, the Program Director has an meeting with the Educational Director in the beginning of November. The college plans to update the clinical possibilities during the BVNPT board meeting.

The school was able to obtain affiliation from the following clinics and awaiting for Board approval. After initial submission of new clinics below, more revisions with guidance from NEC will be in progress.

Clinica Medica Panorama
Clinical Medica Huntington
Clinica Medica Washington-Main
Clinica Medica Vermont

Violation #15

Section 2882 of the Vocational Nursing Rules and Regulations states:

" The course of instruction of an approved school of vocational nursing shall consist of not less than the required number of hours of instruction in such subjects as board may from time to time by regulation determine, together with the required number of hours in the care of medical, surgical, obstetrical patients, sick children, and such other clinical experience as from time to time may be determine by the board.

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 variety of clinical experiences consistent with competency-based objectives and theory being –taught. Clinical objectives which students are expected to master shall be posted on patient care units unit utilized for clinical experience.

BVNPT comments:

As noted on violation # 14, analysis of documents and information provided by the program and reported representatives of identified clinical facilities confirms that the program lacks adequate clinical facilities providing experience in maternity Nursing for enrolled students.

Additionally, Board representatives observed that clinical objectives were not posted on the nursing unit of a clinical facility to which students are assigned. As identified by the director and the clinical instructor, student assignments are based on need of the facility rather than the clinical objectives the students are expected to accomplish. Students interviewed in the last term of the program at the clinical site reported they had not performed task commonly included in basic practice such as catheter insertion and suctioning.

Response (Corrective Action):

All violations incurred by the program to include clinical concerns such as none posting of clinical objectives and not using the "Instructional Plan" as a source of learning objectives/lesson plan for the specific clinical rotation were addressed and discussed among the members of the faculty during the January 10, 2015 Faculty Meeting.

Updated Response by the New Program Director (Elizabeth Estrada, RN, MSN)

Date: September 12, 2015

All clinical instructors are directed to post the clinical objectives on the nursing unit of a clinical facility to which students are assigned. Also, each student is provided with this copy to ensure that student assignments are based on the objectives expected for the day.