

Agenda Item #12.A.7.



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 – Reconsideration of Provisional Approval; 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 is presented for reconsideration of provisional approval. In addition, the program has requested approval to admit one (1) part-time evening class of 20 students to begin July 5, 2016, graduating January 13, 2018. Revocation of the program's provisional approval is recommended.

Recommendations:

1. Revoke the provisional approval of the Preferred College of Nursing, Van Nuys, Vocational Nursing Program, effective immediately.
2. Remove the program from the Board's list of *Approved Vocational Nursing Schools*, effective immediately.

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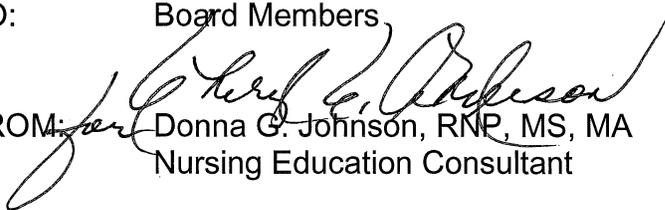
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DATE: April 29, 2016

TO: Board Members

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

SUBJECT: Preferred College of Nursing, Van Nuys, Vocational Nursing Program –
Reconsideration of Provisional Approval; 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 is presented for reconsideration of provisional approval. In addition, the program has requested approval to admit one (1) part-time evening class of 20 students to begin July 5, 2016, graduating January 13, 2018. Revocation of the program's provisional approval is recommended.

On May 16, 2014, with an average annual pass rate of 48% and a total of **three (3) violations identified, in addition to pass rates** that were not compliant with regulatory requirements, the Board placed the program on provisional approval 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. No changes were made regarding the program's approval status.

On February 2 and 3, 2016, an unannounced program inspection was conducted. A total of **seven (7) violations** were identified.

On February 5, 2016, the Board denied the program's request to admit students.

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 July 2016**. However, should the current request be approved, the maximum enrollment would total **30** 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
	10/13 (2/12 PT Eve)		-14	101 – 14 = 87

ENROLLMENT DATA				
CLASS DATES		#Students Admitted	#Students Current or Completed	Total Enrolled
Start	Completed			
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 FT – Day	1/17	10	10	0 + 10 = 10
7/16 PT - Eve (Proposed)	1/18	20		10 + 20 = 30

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 March 2016 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

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
Oct - Dec 2011	5	5	100%	74%	70%	75%	-5
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
Oct - Dec 2015	9	2	22%	75%	53%	72%	-19
Jan - Mar 2016	3	2	67%	73%	54%	73%	-19

*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.”

Based on the **most recent data** available (January through March 2016), the program’s average annual pass rate is **54%**. The California average annual pass rate for graduates from approved vocational nursing programs who took the NCLEX-PN® for the first time is 73%. The average annual pass rate for the Preferred College of Nursing, Van Nuys, Vocational Nursing Program is **19** percentage points **below** the state average annual pass rate.

Since placement on provisional approval in May 2014, the program has been **noncompliant** with regulatory requirements related to pass rates for **five (5) of the last eight (8) quarters**, which is **63%** of the time since placement on provisional approval.

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 seven (7), including the director, who has 100% time dedicated to administrative responsibilities. With the exception of one LVN faculty member, all instructors, including the director, 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 **30** students and two (2) instructors are required. Therefore, the existing faculty meets regulatory requirements regarding minimum faculty per number of students for the current and proposed 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. This assessment is based on proposed placement plans submitted by the program. (See below).

Other Considerations

On **May 16, 2014**, due to non-compliance with regulatory requirements, the Board placed the program on provisional approval for the four – month period from May 16, 2014 through September 30, 2014, and rescinded approval of the program’s ongoing admissions. At that time, the program’s average annual pass rate was **48%** and the program had been noncompliant with regulatory requirements regarding pass rates for eight (8) quarters. The Board issued a *Notice of Change in Approval Status* and required correction of violations. That *Notice* was acknowledged by the director on May 29, 2014. (See Attachment B) Because the program had not submitted reports as required, the Board limited provisional approval to a four (4) month period, which was to be extended for a total of two (2) years, pending receipt of the required program analysis.

On May 30, 2014, the program submitted the required report. 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.**

A brief outline of significant events since placement on provisional approval follows.

- On September 12, 2014, when denying the program’s request to admit students, the Board required the program to submit documentation of approved clinical experience for Obstetrical and Pediatric Nursing. That documentation was **not** received.
- On October 28 and 29, 2014, an unannounced program inspection was conducted by Board representatives. A total of **16 violations** were identified.

- On November 26, 2014, the Board notified the program of placement on the February 2015 Board meeting agenda and requested information for preparation of this report to the Board. (See Attachment C)
- On December 1, 2014, the director notified the Board of her resignation.
- On December 5, 2014, the Board sent, via certified mail, a letter to the program administrator regarding the need for active administration of the program by a Board – approved director.
- On December 29, 2014, a new director was approved by the Board.
- On February 13, 2015, the Board considered the report regarding the unannounced program inspection. The program failed to send a representative to the meeting. At the time of the Board meeting, a total of **11 violations were uncorrected**. The Board continued the program's provisional approval through May 31, 2016.
- On February 23, 2015, the Board issued a *Notice of Change in Approval Status and Required Correction of Violations* to the program. (See Attachment D) Receipt was acknowledged by the program director.
- On March 1, 2015, the program director submitted the required report identifying implemented interventions to correct the violations.
- On March 9, 2015, the Board issued a letter to the program regarding failure to submit required data describing student enrollment as specified in the required corrective actions. (See Attachment E)
- On March 13, 2015, the program submitted the required comprehensive analysis and student enrollment data.
- 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. The summary and analysis of those documents was presented in the November 2015 report to the Board.
- On November 20, 2015, with the program's average annual pass rate at 65%, which was seven (7) percentage points below the state average annual pass rate; with eight (8) violations considered corrected; with plans in place to correct four (4) other violations; with three (3) violations not yet corrected; and with inadequate placements for the total

number of students requested by the program, the Board approved admission of 10 of the 20 requested students.

Violations uncorrected as of the November 2015 report to the Board included the following:

- 1) Inadequate resources to achieve the program's objectives
- 2) Lack of documentation of evaluation of student performance to determine the need for remediation or removal from the program
- 3) Pass rates were noncompliant with regulations.

On December 14, 2015, the program submitted a proposed Student Progress Policy, which, ***if consistently implemented***, would correct the violation related to failure to document evaluation of student performance and remediation. The program submitted photos of the new site and the program submitted a number of invoices and packing slips for skills lab equipment.

An unannounced program inspection was conducted by two (2) Board representatives on **February 2 and 3, 2016**, as a **follow-up** to the October 2014 unannounced inspection.

Program Inspection

During the two (2) day inspection, current students were interviewed, physical resources were examined, student and program records were inspected, and interviews were conducted with the program director and other program representatives. Students were in the initial month of study and were not engaged in clinical experiences as yet. Program staff had difficulty retrieving requested records and in some cases, the records, including attendance records for December 2015 graduates, were not located during the two-day inspection.

The program is now located on the second floor of a building four (4) miles from the previous site. The elevator from street level to the second floor was not functional but a ramp allows for a vehicle to approach the site from the second floor. A large area the program previously referred to as available had not yet been finished and is, apparently a space the program has an option lease in the future.



An assessment of program resources is as follows.

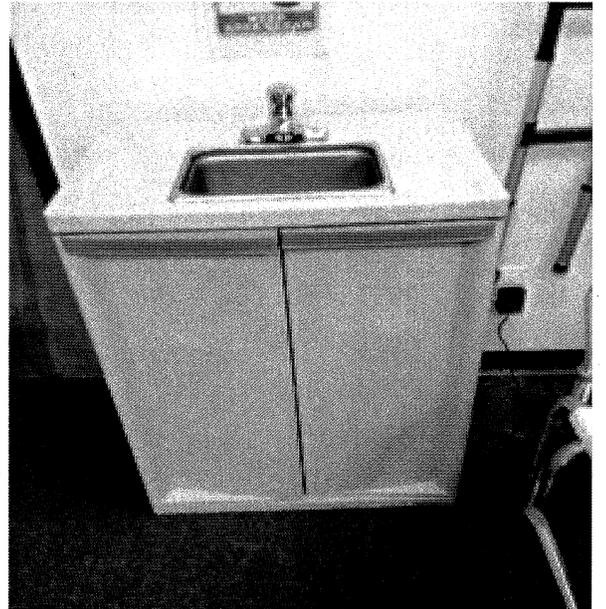
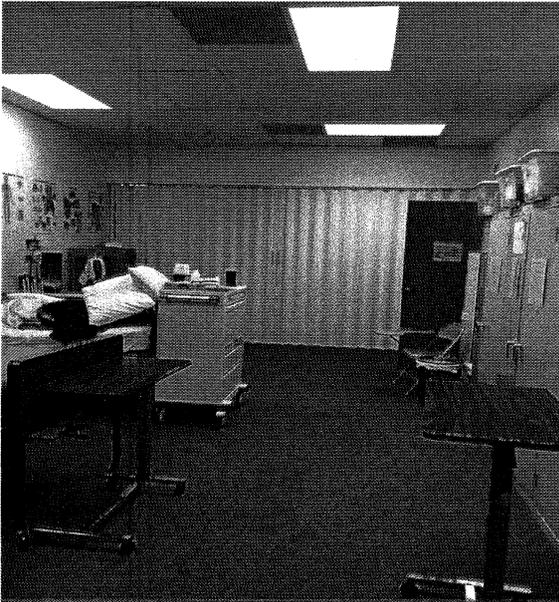
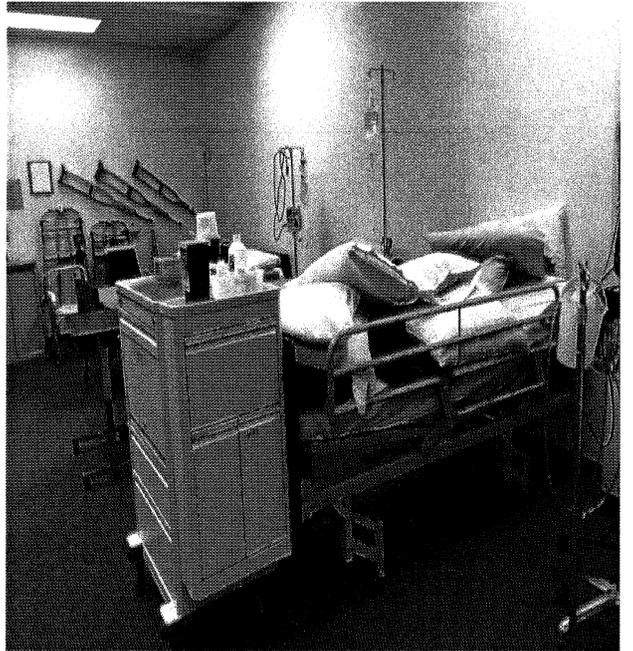
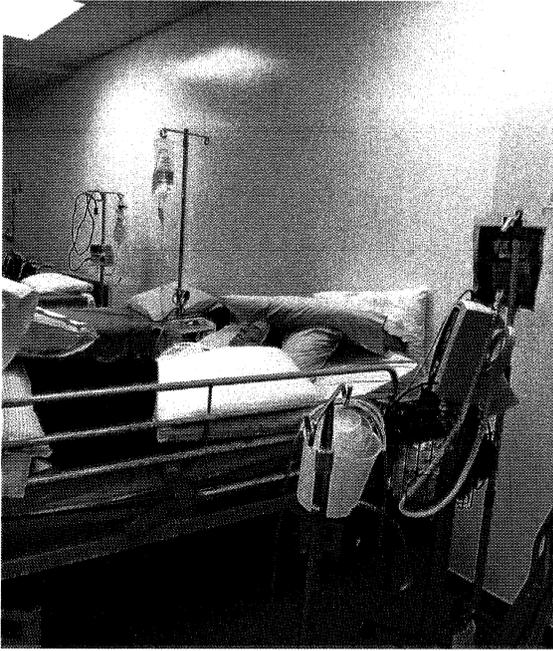
Classroom Space:

A single classroom was available for students. The classroom was set up with 17 seats and a folding screen between the classroom and the skills laboratory. The classroom contained a skeleton, posters on the walls, and a white board. The instructor was using a projector for a PowerPoint presentation. Despite the room being fairly small, projection was very small and could not be adequately visualized from the back of the classroom. Due to the presence of students in the room, a photo was not obtained.

Skills Laboratory (Lab):

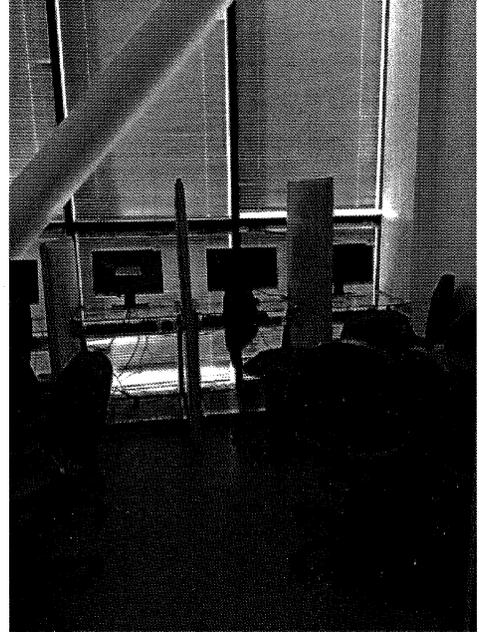
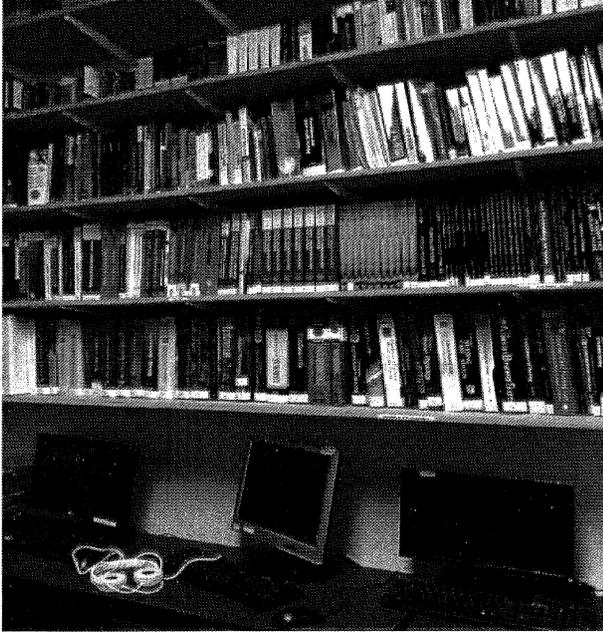
The skills lab contained a portable sink, three (3) hospital beds and one (1) mannequin with detached hands. A well-stocked medication cart was noted, as was most other equipment necessary to achieve the objectives of the program. The exception was that the program lacked adequate equipment to achieve objectives related to skills acquisition in maternity and pediatric nursing.





Computer Laboratory and Hard Copy Library:

During the program inspection, 14 computer stations were set up in a small room that also served as a library.



Based on the program inspection, a total of **seven (7) violations** were identified.

On February 5, 2016, with a rationale of program pass rates that were noncompliant with regulations, with significant deficits identified in the documents submitted in support of the request to admit students, and with an unannounced program inspection having been conducted immediately preceding the meeting, the program withdrew the request to admit students during the meeting. On that date, the Board denied the program's request to admit a class of 20 students.

On February 16, 2016, the Board forwarded a *Notice of Violations* to the program via certified mail, specifying deficiencies identified during the February 2016 inspection (see Attachment F). The program submitted a response to the violations on March 1, 2016 (see Attachment G). Below are the violations and updated status, based on program response.

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 #1: Board files confirm that the program has a methodology and procedure for evaluation of the curriculum. The program revised the intended method for evaluation of the curriculum in March 2015 and again as recently as September 12, 2015, as submitted by the current program director.

Board representatives requested evidence of evaluation of the curriculum. However, the program director failed to 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.

Status #1: The program director stated the program “identified the need for major revisions to the curriculum.” The program submitted evaluations of the program from seven (7) faculty and eight (8) students. All evaluations, using the same instrument, were conducted **after the 2016 program inspection**. Four (4) of the seven (7) faculty members indicated need for changes. Three (3) faculty members completed two (2) evaluations each, all dated late February 2016. Student evaluations were dated in late February 2016. A single student evaluation was not dated.

While the program reports the intent to revise the curriculum, the program has **failed to describe a methodology**, including timeline to ensure evaluation of the curriculum in the future.

This violation is **not** corrected.

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.”

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 #2: Board files confirm that the program has a methodology and procedure for evaluation of clinical facilities. Board representatives requested evidence of evaluation of clinical facilities. The program director failed to produce the requested documentation substantiating that clinical facilities had been evaluated. With two (2) Board representatives present, the director acknowledged there was no written documentation of evaluation of clinical facilities conducted by the director or faculty and that student evaluations were “just handed to me last night.”

Status #2: The program submitted 23 student evaluations of clinical sites, with seven (7) dated July 2014 for the same instructor and facility. A total of three (3) evaluations were dated December 2015 and were for the same site and instructor. A total of 13 student evaluations, covering four (4) sites, were **dated after the program inspection**. There was no indication of review or action on any of the student feedback.

The program submitted a total of four (4) faculty evaluations of four (4) clinical facilities. **The evaluations were dated after the program inspection.** A total of two (2) faculty evaluations of the two (2) facilities were dated **December 2015.**

The program also submitted evaluations of five (5) facilities evaluated on February 24, 2016 and six (6) facilities evaluated on February 25, 2016 by the program director.

The program reports evaluations will be completed by students and faculty prior to the completion of each rotation. The program failed to describe administrative overview of the clinical facility evaluation process or when data will be reviewed and analyzed.

This violation is **not** corrected

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 # 3: No list of resources for counseling is posted or provided to students. When asked for this list, the program director referred the Board representatives to the school catalog. The school catalog lists “**Counseling and Advising Services** – where students obtain help with educational, career, and personal concerns from a trained staff of counselors, specialists, and advisors.” No licensed or trained specialists are on staff. **These are the same findings as the 2014 program inspection.** The program has failed to correct the previously identified violation.

Status #3: The program submitted a list of resources, photo of posted list, and signatures of students that they had received the information.

This violation is **corrected.**

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 #4: Board files confirm the program presented revised policies for evaluation of student progress and remediation after the identification of this violation in October 2014. On March 1, 2015, the program reported a process and revised policy were to be implemented, effective March 2, 2015. The September 12, 2015 updated response to violations reported continued “discrepancies” with policies related to the evaluation of student progress and remediation. On December 14, 2015, the program

director submitted a revised policy, stating the revised policy had been effective elsewhere and would be utilized in this program.

During the February 2016 program inspection, two Board representatives reviewed the 18 files of the most recent graduates. A total of eight (8) student files documented multiple course failures **after** implementation of the new policies in March 2015, indicating the program failed to follow its own policies regarding evaluation of student progress and remediation. As noted in student files examined during the inspection, after March 2015 failing students were allowed to remain in the program without successfully passing a remediation exam, students failing multiple courses in a term remained in the program, and no documentation of follow-up was noted in student files or the remediation binder. Further, there was no improvement in documentation of remediation and follow-up with students **after** the current director was approved by the Board and failing students were still allowed to remain in the program.

In December 2015, the current program director submitted another revised policy for the evaluation of student performance and the need for remediation or removal from the program. However, the January 2016 School Catalog does **not** describe the most recently submitted policy for the evaluation of student performance.

Status #4:

The program has provided documentation that current students have signed a form that they are now in receipt of the policy put forward by the current director in December 2015. The program provided an updated copy of the school catalog that now contains the policy. Board records document that this differs from the digital copy of the catalog provided to Board representatives during the most recent inspection.

The program did not address the failure to implement the policy that was in place from March 1, 2015 throughout the end of the course of study for the December 2015 graduates.

Should the program *consistently implement* the new policy, the violation would be corrected. **However**, the program failed to implement policies regarding evaluation of student progress throughout the time since the October 2014 inspection.

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

“Each school shall have an attendance policy approved by the Board. The policy shall include but not be limited to, criteria for attendance and the specific course objectives for which make-up time is required. Acceptable methods for make-up include:

- (1) Theory: case studies, independent study, written examination, attendance at seminars or workshops, auto-tutorial laboratory, and research reports.

- (2) Clinical: performance evaluation in skills laboratory or additional time in the clinical area with clients/patients.”

Violation #5: During the program inspection on February 2-3, 2016, the program director failed to produce attendance records for the class that graduated on December 30, 2015, stating the records could not be located. Paper sign-in sheets for current students were provided by the class instructor. The program director was not aware of absences identified for the new class.

The attendance policy listed in the school catalog does not include the required aspects of acceptable methods of make-up and does not conform to Board-approved attendance policies.

Status #5: The program reported attendance records for December 2015 graduates were located after the inspection. The program submitted a proposed policy for attendance and acceptable make-up of missed hours. The proposed policy did not identify aspects of an appeals policy that would determine the factors leading to excessive absences has been remedied. The proposed policy lists information regarding acceptable make-up in two (2) locations within the policy. In both locations, the program lists clinical make-up methods that are **not consistent** with regulation.

This violation is **not** corrected.

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 #6: During the program inspection of February 2-3, 2016, the only skills lab materials and equipment related to Pediatric and Maternity Nursing were one (1) pediatric nebulizer, a child’s doll, and a model of a uterus and fetus. After discussing with the program the lack of equipment related to skills training in Maternity and Pediatric Nursing, an instructor emailed the assigned consultant that she has her own maternity supplies. However, the **program** lacks adequate equipment to achieve objectives related to skills acquisition in Maternity and Pediatric Nursing. There are now three (3) beds in the skills lab and one (1) mannequin, which has broken limbs.

As currently arranged, the program has 14 computer stations for student use, which would not accommodate the larger class size that was most recently requested.

Status #6: The program submitted a list of Pediatric and Maternity Nursing equipment, numerous receipts dated February 25, 26, and 29, 2016, and photos indicating a total of 20 computers in the computer lab.

This violation is **corrected**.

Section 2529(b) of the Vocational Nursing Rules and Regulations states:

“Each vocational nursing program shall have one faculty member, designated as director who meets the requirements of subsection (c)(1) herein, who shall actively administer the program. The director is responsible for compliance with all regulations . . .”

Violation #7: The program presents with at least a two-year history of the lack of active administration of the program as noted by the following.

- 1) The May 2014 report to the Board documents the program director failed to provide the required reports and comprehensive analysis in a timely fashion in 2013 and early 2014.
- 2) During the October 2014 program inspection, the part-time director was absent for most of the inspection and stated to Board representatives that she did not know how to evaluate a curriculum (see the February 2015 report to the Board).
- 3) On December 29, 2014, a new part-time director was approved by the Board and was provided notice of the program’s consideration at the upcoming February 2015 Board meeting. No program representative was present during the February 2015 Board meeting.
- 4) On August 26, 2015, a new part-time director was approved by the Board. As noted during the most recent program inspection, violations identified in October 2014 remain uncorrected. The program director could not locate attendance files of the most recently graduated students and was unaware of the location of attendance records for current students. The current director has not evaluated clinical facilities and has not documented evaluation of the curriculum, despite describing, in documents submitted to the Board in September 2015, plans to do so. In addition, after noting continued “discrepancies” in grading and remediation policies and submitting in December 2015 another revised policy, which the director stated would be implemented, the director failed to include the most recently revised policy in the January 2016 School Catalog, issued to newly enrolled students.

This represents a pattern over the past two (2) years of the lack of active administration of the program by a Board-approved director who is responsible for compliance with all regulations.

Status #7: The program was requested to submit for Board approval a written plan, with measurable objectives and specific time lines, to be completed

through the active administration of the program, such that all violations are corrected, including non-compliant program pass rates. **Due no later than March 1, 2016.**

The program stated the following in the summary of response to violations:

“Upon approval and acceptance of this report and acceptance of plans for a new class, the program director will become a full time position.”

The program described an immediate plan of identifying best data collection strategy to assess program success, an overview of the college annual business plan, a long term business plan, final stages of owner transition by May 2016, the director’s involvement with the SoCal Directors of Vocational Nursing, the director dedicating time to developing relationships with clinical facilities and her relationship with Red Cross, submission of curriculum revisions, a wait-list of prospective students, being well positioned to capture public interest, and plans for participation in a large health fair.

Other items mentioned that are more specific to the current students and program compliance with regulations included a planned staff meeting, evaluation of instructors by students and director after each course, plans for a curriculum workshop after approval of a new curriculum, “organized and deliberate review of all components of the curriculum,” director and faculty to meet with students quarterly or more frequently if the student is at risk of failure, and “a campaign to acquire more acute hospitals to include in our clinical rotations.” (As noted on the program’s submitted facility list, the program has **no** acute care sites.)

As noted, the program has not maintained compliance with regulations between program inspections in October 2014 and in February 2016. Also as noted, program pass rates are not compliant with regulations.

While the program has now submitted a plan for more active management by the current director, it **cannot be verified** this will correct the violation.

On March 13, 2016, the program submitted documents related to a major curriculum revision. As previously documented, the program determined in 2014 that the curriculum required significant revision. The curriculum currently in use by the program is the same curriculum that has been in use since 2001. This is the same curriculum that was found ineffective at two (2) other Preferred College of Nursing Vocational Nursing programs, both of which demonstrated poor performance on the licensure examination. **The Board revoked the approval of both programs to offer vocational nursing programs.**

A thorough analysis of the submitted curriculum proposal will be completed as soon as possible.

On March 14, 2016, the Board received the program's request for approval to admit 20 students to a part-time evening class. When requesting to admit students, programs are required to document adequate resources, including how clinical facilities will be utilized by current and proposed students. The program has submitted documentation that all 10 current students would complete **all** Fundamentals of Nursing and **all** Medical-Surgical clinical experiences, that is **688 clinical hours over five (5) terms, in one (1) single skilled nursing facility with a resident census of 145**, as described by the Board-approved clinical facility application. That clinical facility application was requested and approved for use in Term 3, **only**, and is limited to 10 students. The following is taken from the **February 2016 report** to the Board:

"The program now indicates that the students approved by the Board to begin in January 2016 will receive **all** clinical experience except Maternity and Pediatric Nursing in one single facility, severely limiting the student's exposure and learning opportunities. Previously, the program's documents described intent to utilize two facilities for the students, which is still quite minimal for accomplishing the learning objectives of the program."

The program has proposed to place the requested 20 evening students in a total of three (3) nursing facilities over the course of their program of study. Some of the proposed rotations would place ten (10) students in the same facility at the same time the ten (10) currently enrolled students would be utilizing the facility. **This exceeds the number of students allowed by the facility**, according to the Board-approved clinical facility applications.

When a program wishes to utilize a clinical facility, the program completes an application that includes when during the course of study the facility will be utilized and what clinical objectives are to be accomplished. Some facilities allow students access to more complex patient experiences, such as administration of medications to multiple patients, leadership and team management experiences, and engagement in complex treatments. Other facilities do not allow this level of experience and/or do not have patients/residents with such complex needs. The program director has again proposed placing students in facilities during terms for which the facility has not been approved and **appropriate clinical objectives were not provided**. The following was also taken from the **February 2016 report** to the Board:

"According to the list of current clinical facilities provided by the program and the approved facility applications on file, the program has no facilities approved for Term 1, Term 4, or Term 5 Fundamental and Medical-Surgical clinical nursing experiences and only one facility is approved for use in Term 2."

The program has again proposed using clinical facilities in levels or terms of the program for which the facility was **not** approved and for which appropriate clinical objectives have **not** been approved. Further, while the program has been able to describe Maternity and Pediatric rotations in closer accord with the Board-approved Instructional Plan, the program has proposed placements that exceed availability (number of days per week) for two (2) Maternity facilities.

On February 24, 2016, the program director submitted five (5) clinical facility applications. After speaking with the designated contact for all of the facilities, on March 1, 2016, the assigned consultant notified the director of discrepancies between the submitted applications and the details, including number of students to be accepted and available hours, provided

by the designated contact. (See Attachment H) No revisions have been received from the program as of this writing.

As documented since October 2014, the program has not evidenced understanding of the crucial role of appropriate clinical experiences in the education of vocational nurses.

On March 22, 2016, the Board received correspondence from the program's accrediting body, the Accrediting Bureau of Health Education Schools (ABHES). The letter describes that the program must "show cause why its accreditation should not be withdrawn." The letter further states that ABHES **deferred** action on the program's application for a continued grant of accreditation. The current grant of accreditation was extended through August 31, 2016 and further documentation, including a teach-out plan, was required by May 1, 2016. (See Attachment I)

On April 21, 2016, the Board received, from the Bureau for Private Post-secondary Education (BPPE), a copy of a letter sent to the program on April 14, 2016 from the U.S. Department of Education (DOE). The letter describes action taken by the DOE due to failure of the program to submit Gainful Employment Reporting and "serious concerns regarding the institutions' status." The letter, without nine (9) pages of detailed instructions for obtaining funds, is found in Attachment J

Summary

When placed on provisional approval in **May 2014**, the program's average annual pass rate was **48%**. The program's current average annual pass rate is **54%**, which is **19** percentage points **below** the state average annual pass rate. In addition, there is documentation of recurrent violations; a pattern of lack of active administration; and **serious concern regarding ability of currently enrolled students to accomplish program objectives**, given the program's description of planned placements.

Currently, of the **seven (7) violations** identified during an unannounced program inspection in February 2016, two (2) violations (related to program resources and resources for counseling and tutoring) and have been corrected. Plans were proposed for two (2) violations. The program presented a policy for evaluation of student progress that, **if consistently implemented**, would correct the violation. However, this violation was not corrected after the October 2014 inspection, despite a plan from the program. The program also presented a plan for active administration of the program. A component of the plan was that the Board would approve another class before the director became full-time. **Correction of the violation by the submitted plan cannot be verified** at this time. A total of **three (3) violations**, related to evaluation methodology for the curriculum, evaluation methodology for clinical facilities, and the attendance policy **are not corrected at this time**.

There is currently one (1) class of ten students enrolled. The students, in the early phase of the program, are not scheduled to graduate until January 2017.

Recommendations:

1. Revoke the provisional approval of the Preferred College of Nursing, Van Nuys, Vocational Nursing Program, effective immediately.

2. Remove the program from the Board's list of *Approved Vocational Nursing Schools*, effective immediately.

Rationale: The Preferred College of Nursing, Van Nuys, Vocational Nursing Program was placed on provisional approval in May 2014, after eight (8) consecutive quarters of noncompliant pass rates. At the time, the program's pass rate was **48%**. Currently, the program's pass rate is **54%**, which is **19** percentage points **below** the state average annual pass rate.

Since placement on provisional approval, an unannounced program inspection in October 2014 identified 16 violations. A second unannounced program inspection in February 2016 identified, in addition to non-compliant pass rates, seven (7) violations. A total of five (5) of the violations identified in February 2016 were also identified in October 2014.

At this time, a total of **three (3) violations remain uncorrected** and plans, which would require **consistent implementation** to correct regulatory requirements, were submitted as corrections for two (2) violations. However, Board records substantiate that the **program has failed to consistently implement proposed corrections.**

Since placement on provisional approval, the program has had three (3) directors and a pattern of lack of active administration of the program. Since May 2014, the program has demonstrated deficiencies in clinical facilities and placement of students in clinical experiences has been proposed in a manner that is inconsistent with regulatory requirements.

With a program pass rate of **54%**, which is **19** percentage points below the state pass rate and with **persistent uncorrected violations of regulatory requirements, the program has failed to demonstrate progress.** Therefore, in the interest of consumer protection, including the interest of the 10 currently enrolled students, the recommendation is for immediate revocation of the program's approval status.

Immediate revocation of the program's approval status affects ten (10) students. However, as students still in the early phases of the program, those students have the following options:

- a) Transfer to an approved Vocational Nursing Program
- b) Work with representatives of the U.S. Department of Education and the California Bureau of Private Post-secondary Education to seek tuition reimbursement.

Attachment A: History of Prior Board Actions

Attachment B: Board Correspondence Dated May 27, 2014

Attachment C: Board Correspondence Dated November 26, 2014

Attachment D: Board Correspondence Dated February 23, 2015

Attachment E: Board Correspondence Dated March 9, 2015
Attachment F: Notice of Violations Dated February 16, 2016
Attachment G: Program Correspondence Dated March 1, 2016
Attachment H: Board Electronic Correspondence Dated March 1, 2016
Attachment I: ABHES Correspondence Dated February 8, 2015
Attachment J: US Department of Education correspondence dated April 14, 2016

Agenda Item #12.A.7., 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 (l) 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.**
 - On November 20, 2015, the Board approved the following:
 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.
 - On February 2 and 3, 2016, two Board representatives conducted an unannounced program inspection.
 - On February 5, 2016, the Board approved the following:
 1. Deny the Preferred College of Nursing, Van Nuys, Vocational Nursing Program's request for approval to admit one (1) part-time class of 20 students beginning April 4, 2016 and graduating September 25, 2017.
 2. Continue to require the program to admit no additional classes without prior approval by the full Board.
 3. Continue the program's placement on the Board's May 2016 agenda for reconsideration of provisional approval.



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CERTIFIED MAIL

May 27, 2014

Joielynn Herra, Director
Preferred College of Nursing, Van Nuys
Vocational Nursing Program
6551 Van Nuys Blvd., Suite 200
Van Nuys, CA 91401

Subject: Notice of Change in Approval Status

Dear Ms. Herra:

Pursuant to the action of the Board of Vocational Nursing and Psychiatric Technicians (Board) on May 16, 2014, the status of the Preferred College of Nursing, Van Nuys, Vocational Nursing Program has been changed from full approval to provisional approval for the two – year period from May 16, 2014 through September 30, 2014.

The purpose of this letter is to explain the areas of non-compliance found and the corrections required of your program to avoid losing approval completely.

Once you have reviewed this letter, please sign and return the enclosed "Acknowledgement of Change in Approval Status" form by **Friday, June 6, 2014**.

AREAS OF NON-COMPLIANCE [VIOLATION(S)]

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

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

Section 2526 (a)(13) of the Code 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."

Notice of Change in Approval Status

May 27, 2014

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Section 2526 (a)(16) of the Code states:

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

- (13) List of resources for provision of counseling and tutoring services for students."

Section 2527 (a) of the Code states:

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

Section 2530 (a) of the Code 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."

Section 2530(l) of title 16 of the California Code of Regulations states:

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

The program pass rates of the Preferred College of Nursing, Van Nuys, Vocational Nursing Program for the past twenty-two (22) quarters are set forth in the following table.

NCLEX-PN® Licensure Examination Data			
Annual Statistics*			
Quarter	State Average Annual Pass Rate	Program Average Annual Pass Rate	Variance from State Average Annual Pass Rate
July - Sep 2008	74%	75%	+1
Oct - Dec 2008	73%	70%	-3
Jan - Mar 2009	72%	62%	-10
Apr - Jun 2009	70%	61%	-9
July - Sep 2009	72%	62%	-10
Oct - Dec 2009	73%	61%	-12
Jan - Mar 2010	74%	62%	-12
Apr - Jun 2010	75%	62%	-13
Jul - Sep 2010	75%	62%	-13
Oct - Dec 2010	76%	64%	-12

Notice of Change in Approval Status

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NCLEX-PN® Licensure Examination Data			
Annual Statistics*			
Quarter	State Average Annual Pass Rate	Program Average Annual Pass Rate	Variance from State Average Annual Pass Rate
Jan - Mar 2011	77%	70%	-7
Apr - Jun 2011	76%	71%	-5
Jul - Sep 2011	76%	69%	-7
Oct - Dec 2011	75%	70%	-5
Jan - Mar 2012	74%	67%	-7
Apr - Jun 2012	74%	60%	-14
Jul - Sep 2012	74%	56%	-18
Oct - Dec 2012	74%	54%	-20
Jan - Mar 2013	73%	49%	-24
Apr - Jun 2013	73%	54%	-19
Jul - Sep 2013	74%	59%	-15
Oct - Dec 2013	76%	51%	-25
Jan - Mar 2014	76%	48%	-28

*The Annual Pass Rate changes every quarter. It is calculated by dividing the number of candidates who passed during the current and previous three quarters by the number of candidates who tested during the same period. If no data is available for the relevant period, the statistic is carried over from the last quarter for which data is available.

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

REQUIRED CORRECTION(S)

1. Preferred College of Nursing, Van Nuys, Vocational Nursing Program shall submit a written report no later than **June 1, 2014**. The report shall include a comprehensive analysis of the program including all elements in the previously submitted plan of correction, identification of factors negatively impacting student achievement, specific actions taken to improve program pass rates, the effect of employed interventions, and specific program resources required for achievement of program objectives.
2. The program shall admit no additional students without prior approval by the full Board.
3. If the program fails to submit the report as specified in Corrective Action #1, place the program on the September 2014 Board agenda for reconsideration of provisional approval.
4. If the program submits the report as specified in Corrective Action #1, by **June 1, 2014**, the program's provisional approval shall be extended from September 30, 2014 through May 31, 2016.

Notice of Change in Approval Status

May 27, 2014

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5. The program shall bring its average annual pass rate to no more than ten (10) percentage points below the State average annual pass rate.
6. The program shall 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.
7. The program shall 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.
8. The program shall 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. Failure to take any of these corrective actions may cause the full Board to revoke the program's approval.

FUTURE BOARD ACTION

Your program will be placed on the **September 2014** Board Meeting agenda, at which point the Board may revoke or extend the program's approval. If you have additional information that you wish considered beyond the required corrections listed on page 3 and 4, you must submit this documentation by the fifteenth day of the second month prior to the Board meeting.

Notice of Change in Approval Status

May 27, 2014

Page 5 of 5

OTHER IMPORTANT INFORMATION

Please be advised that, pursuant to the Board's regulations, the program will not be authorized to admit new classes beyond the established pattern of admissions previously approved by the Board. The established pattern of admissions approved by the Board is as follows: **Prior approval by the full Board is required to admit classes.**

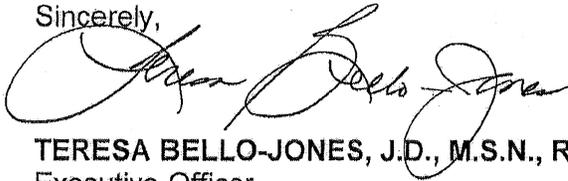
In the event your program is required to submit any report(s) as a corrective action pursuant to this notice, such reports are required in addition to any other reports required pursuant to 2527 of the Board's regulations.

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

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

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

Sincerely,



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

Enclosures

cc: Board Members

TBJ/sc



BUSINESS, CONSUMER SERVICES, AND HOUSING AGENCY • GOVERNOR ED MUNDINO, BROWN JR.

BOARD OF VOCATIONAL NURSING & PSYCHIATRIC TECHNICIANS
2535 Capitol Oaks Drive, Suite 205, Sacramento, CA 95833-2945
Phone (916) 263-7800 Fax (916) 263-7855 Web www.bvnpt.ca.gov



BVN _____
ON _____

Acknowledgement of Change in Approval Status

I, Joielynn Herra, director of Preferred College of Nursing, Van Nuys.
(Director's Name) (Name of Program)

Vocational Nursing Program hereby acknowledge that this program approval status has been changed from full approval to provisional approval for the four – month period from May 16, 2014 through September 30, 2014. I understand that in accordance with Section 2526.1 (f) of the Vocational Nursing Rules and Regulations and Section 2581.1 (f) of the Psychiatric Technician Rules and Regulations, the Board will consider any advertisement of full approval while on provisional approval as "material misrepresentation of fact." "Material misrepresentation of fact" may lead to revocation of the program's approval. Further, I understand the program's provisional approval status will be reflected on the Board's internet website.

Please complete and return this form to the Board by Friday, June 6, 2014.

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

J. Herra
(Signature of Director)

5/29/14
(Date)

BVNPT Received on 5/28/14 with EDU



Agenda Item # 12.A.7 Attachment C

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



Board of Vocational Nursing and Psychiatric Technicians
2535 Capitol Oaks Drive Suite 205, Sacramento, CA 95833-2945
Phone 916-263-7800 Fax 916-263-7855 Web www.bvnpt.ca.gov

November 26, 2014

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

Subject: Program Approval Status

Dear Ms. Herra,

The Board of Vocational Nursing and Psychiatric Technicians (Board) is scheduled to consider the following elements relative to the **Preferred College of Nursing, Van Nuys, Vocational Nursing Program** on **February 13, 2015**:

- Reconsideration of Provisional Approval Based on Report of Unannounced Survey Visit

In preparation for that meeting, information is requested relative to the program's enrollment, approved faculty, clinical resources, and other critical program resources. Please complete and submit the attached forms by **December 15, 2014**.

Any other materials you wish the Board to consider are also due **no later than December 15, 2014**.

Should you have questions, please do not hesitate to contact me at (916) 263-7842.

Sincerely,

Donna G. Johnson

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

Attachments:

1. Blank Enrollment Data Table.
2. Blank Faculty and Facility Forms (list **ONLY CURRENT** faculty and facilities)
3. Blank Faculty/Student Clinical Assignment Form
4. Blank Maternity Faculty/Student Clinical Assignment Form
5. Blank Pediatric Faculty/Student Clinical Assignment Form

Agenda Item #12.A.7., Attachment D



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



Board of Vocational Nursing and Psychiatric Technicians
2535 Capitol Oaks Drive Suite 205, Sacramento, CA 95833-2945
Phone 916-263-7800 Fax 916-263-7855 Web www.bvnpt.ca.gov

CERTIFIED MAIL

February 23, 2015

Sasha Rarang, B.S., R.N.
Director, Vocational Nursing Program
Preferred College of Nursing, Van Nuys
6551 Van Nuys Blvd #200
Van Nuys, CA 91401

Subject: Notice of Change in Approval Status

Dear Ms. Rarang,

Pursuant to the action of the Board of Vocational Nursing and Psychiatric Technicians (Board) on May 16, 2014, Preferred College of Nursing, Van Nuys, Vocational Nursing Program's provisional approval was changed from full approval to provisional approval for the three (3) month period from May 16, 2014 through September 30, 2014 and subsequently extended through May 31, 2016.

On February 13, 2015, the Board identified additional program deficiencies. The purpose of this letter is to explain the areas of non-compliance found and the corrections required of your program to avoid losing approval completely.

Once you have reviewed this letter, please sign and return the enclosed "Acknowledgement of Change in approval Status" form by **Monday, March 2, 2015**.

AREAS OF NON-COMPLIANCE / VIOLATION(S)

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

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

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."

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."

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."

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."

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."

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

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

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. "

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."

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."

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

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

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."

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."

The program pass rates of the Preferred College of Nursing, Van Nuys, Vocational Nursing Program for the past 21 quarters are set forth in the following table.

NCLEX-PN® Licensure Examination Pass Rates			
Quarter	State Annual Average Pass Rate	Program Annual Average Pass Rate	Variance from State Annual Average Pass Rate
Oct – Dec 2009	73%	61%	-12
Jan – Mar 2010	74%	62%	-12
Apr – Jun 2010	75%	62%	-13
Jul – Sep 2010	75%	62%	-13
Oct – Dec 2010	76%	64%	-12
Jan – Mar 2011	77%	70%	-7
Apr – Jun 2011	76%	71%	-5
Jul – Sep 2011	76%	69%	-7
Oct – Dec 2011	75%	70%	-5
Jan – Mar 2012	74%	67%	-7
Apr – Jun 2012	74%	60%	-14
Jul – Sep 2012	74%	56%	-18
Oct – Dec 2012	74%	54%	-20
Jan – Mar 2013	73%	49%	-24
Apr – Jun 2013	73%	54%	-19
Jul – Sep 2013	74%	59%	-15
Oct – Dec 2013	76%	51%	-25
Jan – Mar 2014	76%	48%	-28
Apr – Jun 2014	73%	47%	-26
Jul – Sep 2014	73%	48%	-25
Oct – Dec 2014	72%	55%	-17

Based on this data, the program failed to meet regulatory requirements for vocational nursing programs.

REQUIRED CORRECTIONS

1. The Preferred College of Nursing, Van Nuys, Vocational Nursing Program shall bring its average annual pass rate to no more than ten (10) percentage points below the State average annual pass rate.
2. The program shall continue to admit no additional classes without prior approval by the full board.
3. The program shall correct program deficiencies identified during the onsite inspection and submit a report identifying implemented interventions no later than **March 1, 2015**.
4. The program shall 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**.

5. The program shall submit, under penalty of perjury, documentation of clinical experiences for both Pediatric and Maternity Nursing for all students scheduled to graduate in 2015 prior to graduation.
6. The program shall 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.
7. The program shall 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. The program shall 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.

FUTURE BOARD ACTION

Your program has been scheduled for the **May 2016** Board Meeting agenda, at which point the Board may revoke or extend the program's approval. The nursing education consultant assigned to your program will ask you to submit documentation of the

Notice of Change in Required Corrections
Preferred College of Nursing, Van Nuys
Vocational Nursing Program
February 23, 2015
Page 6 of 6

correction of your violations(s) by the fifteenth day of the second month prior to that Board meeting. If you have additional information that you wish considered beyond the required corrections listed on pages 4 and 5, you must submit this documentation by the fifteenth day of the second month prior to that Board meeting.

OTHER IMPORTANT INFORMATION

Please be advised that, pursuant the Board's regulations, the program will not be authorized to admit new classes beyond the established pattern of admissions previously approved the Board. The established pattern of admissions approved by the Board is as follows: **Approval by the full Board is required prior to the admission of additional classes.**

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

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

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

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

Sincerely,



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

Enclosures

Cc: Board Members

TBJ:cca



TITLE 16 CALIFORNIA CODE OF REGULATIONS

2526.1. Provisional Approval.

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



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

BOARD OF VOCATIONAL NURSING & PSYCHIATRIC TECHNICIANS
2535 Capitol Oaks Drive, Suite 205, Sacramento, CA 95833-2945
Phone (916) 263-7800 Fax (916) 263-7855 Web www.bvnpt.ca.gov



February 23, 2015

TO: Education Division

FROM: Preferred College of Nursing, Van Nuys, Vocational Nursing Program

SUBJECT: *Acknowledgement of Receipt of Board Meeting Materials*

I, hereby acknowledge receipt of the following documents with attachments memorializing Board decisions rendered at the February 13, 2015 Board Meeting.

➤ *Preferred College of Nursing, Van Nuys, Vocational Nursing Program.*

1. *Notice of Change in Approval Status.*
2. California Code of Regulations Excerpt Section 2526.1. Provisional Approval.
3. *Certificate of Provisional Approval.*

Please sign and fax the *Acknowledgement of Receipt of Board Meeting Materials* to the Board at (916) 263-7866 by Monday, March 2, 2015.

(Signature, Director)

(Date)

Name of Program: _____

**Please complete this form and fax to the Board at
(916) 263-7866 by Monday, March 2, 2015.**



CERTIFICATE OF PROVISIONAL APPROVAL

for

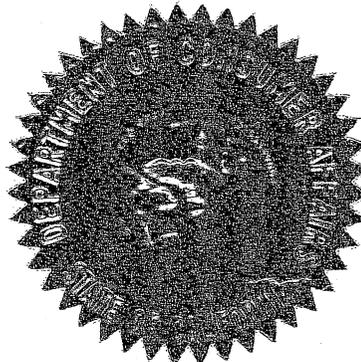
Preferred College of Nursing, Van Nuys Vocational Nursing Program

This document reflects that the Board of Vocational Nursing and Psychiatric Technicians (Board) has provisionally approved the above-named program pursuant to Article 5 of the Vocational Nursing Practice Act and the Board's Rules and Regulations. A copy of documents related to the provisional approval may be obtained by contacting the Board at the address above. A candidate's completion of an approved vocational nursing program is partial fulfillment of requirements for the vocational nurse licensure examination.

Effective: May 16, 2014



Todd D'Braunstein, P.T.
President



Expires: May 31, 2016



Teresa Bello-Jones
Executive Officer

Agenda Item #12.A.7., Attachment E



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

Board of Vocational Nursing and Psychiatric Technicians
2535 Capitol Oaks Drive Suite 205, Sacramento, CA 95833-2945
Phone 916-263-7800 Fax 916-263-7855 Web www.bvnpt.ca.gov



CERTIFIED MAIL

March 9, 2015

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

Dear Ms. Rarang,

On February 23, 2015, the Board of Vocational Nursing and Psychiatric Technicians (Board) forwarded to you, per certified mail, the *Notice of Change of Approval Status* of the Preferred College of Nursing, Van Nuys, Vocational Nursing Program. The program's receipt of the *Notice* was confirmed by the acknowledgment you signed on March 2, 2015. The *Notice* specified areas of identified noncompliance and corrections required of your program in order to avoid losing approval completely.

As specified in the *Notice*, Corrective Action # 4 requires that the program shall 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**.

To date, you have failed to provide the required information.

Also as specified in the *Notice*, Corrective Action # 5 requires that the program shall submit, under penalty of perjury, documentation of clinical experiences for both Pediatric and Maternity Nursing for all students scheduled to graduate in 2015 **prior** to graduation.

On March 2, 2015, the Board received, via electronic correspondence, the program's Response to the Report of Unannounced Survey Visit. Attached as Appendix F is a document titled, "Current Evidence for Use of Maternity and Pediatric Facilities – Letter of Request to Rotate to [names of two specific facilities]"

Be informed that this does not fulfill the requirement of Corrective Action #5. Therefore, to date, you have failed to provide the required information.

Failure to comply with required corrections may cause the full Board to revoke the program's approval.

You may wish to further consult with Board staff regarding fulfilling the required corrective actions. Please do not hesitate to contact the Board.

Sincerely,

Donna G. Johnson

Donna G. Johnson, RNP, MS, MA

Nursing Education Consultant

donna.johnson@dca.ca.gov

916-263-7842



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

Board of Vocational Nursing and Psychiatric Technicians
2535 Capitol Oaks Drive Suite 205, Sacramento, CA 95833-2945
Phone 916-263-7800 Fax 916-263-7855 Web www.bvnpt.ca.gov



CERTIFIED MAIL

February 16, 2016

Elizabeth Estrada, Director
Vocational Nursing Program
Preferred College of Nursing, Van Nuys
7400 Van Nuys Blvd #207
Van Nuys, CA 91401

Subject: Notice of Violations

Dear Ms. Estrada,

On February 2 and 3, 2016, two (2) Board representatives conducted an unannounced program inspection, during which current students were interviewed, physical resources were examined, student and program records were inspected, and interviews were conducted with the program director and other program representatives. Based on the inspection, the following violations were identified.

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 #1:

Board files confirm that the program has a methodology and procedure for evaluation of the curriculum. The program revised the intended method for evaluation of the curriculum in March 2015 and again as recently as September 12, 2015, as submitted by the current program director.

Board representatives requested evidence of evaluation of the curriculum. However, the program director 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.

Required Action:

The program has presented two different plans for evaluation of the curriculum after the notice of violation for failure to

provide documentation of evaluation of the curriculum in 2014. To date, the program has not produced evidence that the original curriculum is being evaluated for effectiveness, currency, and consistency with the NCLEX-PN® test plan.

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.”

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 #2:

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. The program director failed to produce the requested documentation substantiating that clinical facilities had been evaluated. With two (2) Board representatives present, the director acknowledged there was no written documentation of evaluation of clinical facilities conducted by the director or faculty and that student evaluations were “just handed to me last night.”

Required Action:

On Sept 12, 2015, the current program director submitted an updated response to violations identified in 2014. According to that response, the director planned to visit all clinical rotation sites and to conduct periodic clinical site visits. To date, the program has not produced evidence that clinical facilities are being evaluated, other than by students, or that student feedback is being considered.

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 # 3: No list of resources for counseling is posted or provided to students. When asked for this list, the program director referred the Board representatives to the school catalog. The school catalog lists "**Counseling and Advising Services** – where students obtain help with educational, career, and personal concerns from a trained staff of counselors, specialists, and advisors." No licensed or trained specialists are on staff. These are the same findings as the 2014 program inspection. The program has failed to correct the previously identified violation.

Required Action: Provide a copy of a list of resources for counseling in the area and provide documentation that this has been provided to currently enrolled students. **Due no later than March 1, 2016.**

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 #4: Board files confirm the program presented revised policies for evaluation of student progress and remediation after the identification of this violation in October 2014. On March 1, 2015, the program reported a process and revised policy were to be implemented, effective March 2, 2015. The September 12, 2015 updated response to violations reported continued "discrepancies" with policies related to the evaluation of student progress and remediation. On December 14, 2015, the program director submitted a revised policy, stating the revised policy had been effective elsewhere and would be utilized in this program.

During the February 2016 program inspection, two Board representatives reviewed the 18 files of the most recent graduates. A total of eight (8) student files documented multiple course failures **after** implementation of the new policies in March 2015, indicating the program failed to follow its own policies regarding evaluation of student progress and remediation. As noted in student files examined during the inspection, after March 2015 failing students were allowed to remain in the program without successfully passing a remediation exam, students failing multiple courses in a term remained in the program, and no documentation of follow-up

was noted in student files or the remediation binder. Further, there was no improvement in documentation of remediation and follow-up with students **after** the current director was approved by the Board and failing students were still allowed to remain in the program.

In December 2015, the current program director submitted another revised policy for the evaluation of student performance and the need for remediation or removal from the program. However, the January 2016 School Catalog does **not** describe the most recently submitted policy for the evaluation of student performance.

Required Action: As noted above, the program submitted revised policies for evaluation of student progress and remediation. As noted during the program inspection, the program has failed to follow the submitted policies. Further the program has not presented the most recent policy to newly enrolled students in the current version of the School Catalog dated January 2016.

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

“Each school shall have an attendance policy approved by the Board. The policy shall include but not be limited to, criteria for attendance and the specific course objectives for which make-up time is required. Acceptable methods for make-up include:

- (1) Theory: case studies, independent study, written examination, attendance at seminars or workshops, auto-tutorial laboratory, and research reports.
- (2) Clinical: performance evaluation in skills laboratory or additional time in the clinical area with clients/patients.”

Violation #5: During the program inspection on February 2-3, 2016, the program director failed to produce attendance records for the class that graduated on December 30, 2015, stating the records could not be located. Paper sign-in sheets for current students were provided by the class instructor. The program director was not aware of absences identified for the new class.

The attendance policy listed in the school catalog does not include the required aspects of acceptable methods of make-

up and does not conform to Board-approved attendance policies.

Required Correction: Submit for Board approval a proposed policy for attendance that includes timely make-up and acceptable methods of make-up for both theory and clinical absences. Submit a written plan for monitoring and tracking attendance and make-up for both theory and clinical absences. **Due no later than March 1, 2016.**

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 #6: During the program inspection of February 2-3, 2016, the only skills lab materials and equipment related to pediatric and maternity nursing were one (1) pediatric nebulizer, a child’s doll, and a model of a uterus and fetus. After discussing with the program the lack of equipment related to skills training in maternity and pediatric nursing, an instructor emailed the assigned consultant that she has her own maternity supplies. However, the **program** lacks adequate equipment to achieve objectives related to skills acquisition in maternity and pediatric nursing. There are now three (3) beds in the skills lab and one (1) mannequin, which has broken limbs.

As currently arranged, the program has 14 computer stations for student use, which would not accommodate the larger class size that was most recently requested.

Required Action: Document acquisition of materials for instruction in maternity and pediatric nursing such that program objectives can be accomplished. **Due no later than March 1, 2016.**

Section 2529(b) of the Vocational Nursing Rules and Regulations states:

“Each vocational nursing program shall have one faculty member, designated as director who meets the requirements of subsection (c)(1) herein, who shall actively administer the program. The director is responsible for compliance with all regulations . . .”

Violation #7:

The program presents with at least a two-year history of the lack of active administration of the program as noted by the following.

- 1) The May 2014 report to the Board documents the program director failed to provide the required reports and comprehensive analysis in a timely fashion in 2013 and early 2014.
- 2) During the October 2014 program inspection, the part-time director was absent for most of the inspection and stated to Board representatives that she did not know how to evaluate a curriculum (see the February 2015 report to the Board).
- 3) On December 29, 2014, a new part-time director was approved by the Board and was provided notice of the program's consideration at the upcoming February 2015 Board meeting. No program representative was present during the February 2015 Board meeting.
- 4) On August 26, 2015, a new part-time director was approved by the Board. As noted during the most recent program inspection, violations identified in October 2014 remain uncorrected. The program director could not locate attendance files of the most recently graduated students and was unaware of the location of attendance records for current students. The current director has not evaluated clinical facilities and has not documented evaluation of the curriculum, despite describing, in documents submitted to the Board in September 2015, plans to do so. In addition, after noting continued "discrepancies" in grading and remediation policies and submitting in December 2015 another revised policy, which the director stated would be implemented, the director failed to include the most recently revised policy in the January 2016 School Catalog, issued to newly enrolled students.

This represents a pattern over the past two years of the lack of active administration of the program by a Board-approved director who is responsible for compliance with all regulations.

Required Action:

Submit for Board approval a written plan, with measurable objectives and specific time lines, to be completed through the active administration of the program, such that all

February 16, 2016
Notice of Violations
Preferred College of Nursing, Van Nuys
Vocational Nursing Program
Page 7 of 7

violations are corrected, including non-compliant program
pass rates. **Due no later than March 1, 2016.**

Should you have any questions, please contact the Board.

Sincerely,

Donna G. Johnson
Donna G. Johnson, RNP, MS, MA
Nursing Education Consultant
donna.johnson@dca.ca.gov
916-263-7842

**PREFERRED COLLEGE OF NURSING
RESPONSE TO VIOLATIONS**

Received by the Board March 1, 2016

On March 1, 2016, the program submitted three (3) emails containing 232 pages. Below is a description of the response to each violation, a list of what follows as Attachment H, and what was redacted.

Preferred College of Nursing, Van Nuys, Vocational Nursing Program Response to Violations – March 1, 2016			
Title	#Pages.	Redacted	Attached
Summary	4	None	All
Violation #1	20	Evaluations with names	Cover page, one sample with name redacted
Violation #2	53	List of facilities with contact information, evaluations with identifying data	Samples of each instrument with names redacted
Violation #3	15	The specific resources, student signatures, photo of the posting	Cover page
Violation #4	15	Student signatures	Cover page and policy
Violation #5	6	None	Cover page and proposed policy
Violation #6	29	Receipts, photos	Cover page, list of equipment, one computer lab photo
Violation #7	7	None	Cover page and plan
School Catalog	83	All	None; the program replaced the old policy for evaluation of student progress with the new policy, which is attached in Violation #4

SUMMARY OF RESPONSE TO VIOLATIONS

Referred to from NEC letter dated February 16, 2016

(submitted by electronic response)

Violation / Deficiency	Measurable Objectives	Strategy	Timeline
<p>1. The program director 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.</p>	<p>Copies of evaluations done by faculty and students are attached to this electronic response by email.</p> <p>The PDF Response to Violation #1 contains Faculty evaluations pp. 2-11 And student evaluations pp. 12-20</p>	<p>The Director has identified the need for major revisions to the curriculum. The assessment and revisions are planned to be submitted for approval to the NEC. The new curriculum will be for use for new part time class when approved.</p>	<p>Revisions will be submitted with the request for new class by March 13.</p>
<p>2. The program director failed to produce the requested documentation substantiating that clinical facilities had been evaluated. The director acknowledged there was no written documentation of evaluation of clinical facilities conducted by the director or faculty.</p>	<p>Attached are forms utilized for clinical evaluation of facilities.</p>	<p>When the students are actively at clinical sites, new evaluations will be done prior to their completion of a rotation at each site.</p>	<p>Near when the clinical rotations are completed for Class 44 first term, a clinical facility survey will be filled out by students, and faculty. This will happen approximately end of April or beginning of May.</p>

<p>3. No list of resources for counseling is posted or provided to students.</p>	<p>Attached in pdf regarding Violation #3 are signed documents (pp. 4 – 14) of receipt by all current students regarding counseling services available.</p> <p>In addition, a list is posted on the hallway wall and two pictures show observable evidence (pp. 2-3)</p>	<p>This will be complied with on a consistent basis.</p>	<p>Completed.</p>
<p>4. There was no improvement in documentation of remediation and follow-up with students after the current director was approved by the Board and failing students were still allowed to remain in the program.</p> <p>The program has failed to follow the submitted revised policies for evaluation of student progress and remediation. Further, the program has not presented the most recent policy to newly enrolled students in the current version of the School Catalog dated January 2016.</p>	<p>Copy of the Student Progress Policy is in attached pdf regarding this violation.</p> <p>Copies of the Student Progress Policy was provided to each student and a signed receipt from each student has been recorded (pp. 4-14) of attached pdf regarding Violation #4.</p> <p>In addition, a copy of most recent catalog with the STUDENT PROGRESS POLICY is included starting on p. 26.</p>	<p>Each time policies and procedures are updated, students will be provided copies and they will sign acknowledgement of receipt</p>	<p>Completed.</p>

<p>5. The program director failed to produce attendance records for the class that graduated on December 30, 2015, stating the records could not be located.</p> <p>The program director was not aware of absences identified for the new class.</p> <p>The attendance policy listed in the school catalog does not include the required aspects of acceptable methods of make-up and does not conform to Board-approved attendance policies.</p>	<p>Attendance records were found for Batch 43 in the boxes in the storage unit that were moved from former location. The binder of attendance was in a part time teachers' moving box with no indication that this binder was inside this found box.</p> <p>Proposed Attendance policy and make up policy has been revised and attached with this document.</p>	<p>Available for review. Upon request from the BVNPT, it can be digitized and sent if necessary.</p> <p>Once the policy is reviewed by BVNPT and approved, it will be given to the students, record receipt signed by students, then updated in the catalog.</p>	<p>Records are available for inspection.</p> <p>Completed and awaiting approval from BVNPT for execution</p>
<p>6. The program lacks adequate equipment to achieve objectives related to skills acquisition in maternity and pediatric nursing.</p>	<p>Part I includes Documentation of material for maternity and Pediatrics which includes list of supplies, pictures of items (pp. 3-8), Items paid awaiting delivery (pp. 9-16)</p>	<p>Set up periodic review and Maintenance of equipment prior to upcoming specialty rotation the needed equipment and supplies for the maternity and pediatric rotations for needed restocking</p>	<p>Completed with items on order awaiting delivery.</p>

	<p>Part II includes pictures of computer lab with 20 computer stations (pp. 17-28)</p>		
<p>7. Non-compliant program pass rate and plan for active administration.</p>	<p>Published pass rates are measurable objectives.</p> <p>It must be noted that the lack of information about former students and "outliers" who have been given an ATT but have not tested within the year creates a difficulty for the programs. A new director has to take on the burden of these "outliers" without any possibility of affecting or improving the results.</p> <p>Unfortunately, this director will have to wait until the students directly under management now can complete their education and have the opportunity to pass the NCLEX.</p> <p>This will be the only solid indication of the success of the program under this director's leadership.</p>	<p>The school is actively reaching out, attempting to contact former students to offer resources to help them pass the NCLEX exam.</p> <p>On February 26, an agreement with ATI was reached to utilize their resources as our primary tool for ATI testing and NCLEX prep with their Virtual Tutor.</p> <p>Please see Program Development Plan in attached PDF.</p>	<p>The school is in active communication with the recent Class (Batch) 43 who are in the process of starting their NCLEX review. They will receive a 72 hour review from March 7 through April 2nd.</p> <p>DEVELOPMENT PLAN FOR MORE PROGRAM DIRECTOR TIME FOR ACTIVE ADMINISTRATION:</p> <p>The Director has already increase time and responsibility to the program.</p> <p>Upon approval and acceptance of this report and acceptance of plans for a new class, the program director will become a full time position.</p>

RESPONSE TO VIOLATION # 1

CURRICULUM EVALUATION

Faculty Evaluations – pp 2 – 11

Student Evaluations – pp 12 - 20



**EDUCATIONAL PROGRAM & CURRICULUM ASSESSMENT QUESTIONNAIRE
FOR VOCATIONAL NURSING PROGRAM**

CRITERIA	YES	NO
1. The school's mission and philosophy reflect faculty's beliefs and values on teaching and learning processes.	x	
2. The program mission is parallel to that of the school's mission.	x	
3. The program curriculum has an organizing framework that reflects its mission and philosophy.	x	
4. The concepts of an organizing framework readily identify all tracks of the educational program.	x	
5. The program goals and objectives are relevant and functional in all areas.	x	
6. The goals of the programs are stated in such a way that they serve as guides for measuring outcomes of the program.	x	
7. The curriculum objectives are reflective of the mission, overall purpose and goal, and organizing framework.	x	
8. The curriculum objectives are measurable, realistic and attainable.	x	
9. The curriculum components are logical and sequential.	x	
10. The curriculum objectives are learner-centered and include expected learner behavior at a given level and time frame.	x	
11. The implementation plan for the curriculum reflects the organizing framework, overall purpose and goal, and end-of-program objectives.	x	
12. The curriculum plan, its prerequisites and courses contents, terminal competencies are relevant to current practice demands of the profession and projected future changes.		x
13. The curriculum is effective to provide concepts necessary for NCLEX-PN® preparation.	x	
14. The curriculum is current and consistent with the NCLEX-PN® test plan.		x

Comments:

Evaluated by:

[REDACTED]

Student

Faculty

Date:

Feb. 22, 2016

Response to Violation #2

CLINICAL FACILITY EVALUATION

**Faculty Evaluations of Facilities submitted in
2014 and 2015– pp. 1 – 11**

**Student evaluation of instructor and facilities
February 2016 – pp. 12 – 24**

**Instructor Evaluation of Facilities
2016– pp. 25-30**

**Program Directors' clinical visit survey
pp. 31 - 51**



STUDENT EVALUATION FORM FOR CLINICAL INSTRUCTOR & CLINICAL EXPERIENCE

NAME OF CLINICAL INSTRUCTOR: _____ DATE: 4-26-15
SUBJECT OF CLINICAL EXPERIENCE: GI NAME OF FACILITY: Woodland Care
TERM: 4 PROGRAM: VN

The following is a list of items relative to the clinical instructor and clinical experience. This survey should be anonymous, thus, *do not sign or identify yourself on this form*. Your evaluation is crucial to enhancing the instructor's performance and to assess the viability of the experience and training you have received at your clinical site.

1. Were objectives in the clinical evaluation form met? Yes No _____
If not, state which number and why? _____
2. Were you able to apply information learned in the classroom to the clinical situation? Yes No _____
State which area in particular: _____
If not, state the reason: _____
3. Were the nursing personnel accessible when you needed their supervision and assistance?
Yes No _____ Sometimes _____
4. Did the staff and clinical site display a positive attitude towards students?
Yes No _____ Sometimes _____
5. Have you been provided an opportunity to interact with patients?
Yes No _____ Sometimes _____
6. Did the program training prepare you to use the job site equipment? Yes No _____
7. What procedure/situation was the most difficult for you to undertake, if any? Maintaining a patient relationship
9. What duties do you wish you had more time to work on? more on learning diagnosis and lab values
10. What area(s) should be improved or changed at the clinical site that would be helpful for students to get a more applicable experience? _____
11. Would you recommend this site be used for future students? Yes No _____

For your Clinical Instructor, please encircle: 5-Excellent 4-Very Good 3-Good 2-Fair 1-Poor

- | | | | | | |
|---|---|----------|----------|----------|---|
| 1. Sets objectives that are specific and understandable | 5 | 4 | <u>3</u> | 2 | 1 |
| 2. Shows positive rapport with students | 5 | 4 | <u>3</u> | 2 | 1 |
| 3. Demonstrates skills, attitudes, and values that are to be developed by the students | 5 | 4 | <u>3</u> | 2 | 1 |
| 4. Accessible when supervision and assistance are needed | 5 | <u>4</u> | 3 | 2 | 1 |
| 5. Shows enthusiasm and positive disposition | 5 | 4 | <u>3</u> | 2 | 1 |
| 6. Provides adequate clinical experience to meet clinical objectives | 5 | 4 | 3 | <u>2</u> | 1 |
| 7. Begins the session on time and does not dismiss the class before time | 5 | 4 | <u>3</u> | 2 | 1 |
| 8. Demonstrates resourcefulness and creativeness | 5 | 4 | 3 | <u>2</u> | 1 |
| 9. Conducts pre-conference and provides adequate laboratory time as preparation for clinical experience | 5 | 4 | 3 | <u>2</u> | 1 |
| 10. Provides feedback to improve clinical performance through post-conference, post-tests and quizzes | 5 | 4 | <u>3</u> | 2 | 1 |

OVERALL EVALUATION OF THE CLINICAL INSTRUCTOR:

(Please rate your instructor on a scale between 1 and 5, with 5 being best). Encircle the number.

5 4 3 2 1
Excellent Very Good Good Fair Poor

OVERALL EVALUATION OF YOUR CLINICAL EXPERIENCE:

(Please rate your overall clinical experience on a scale between 1 and 5, with 5 being excellent), Encircle the number.

5 4 3 2 1
Excellent Good Somewhat Poor Not at all



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FACULTY EVALUATION OF CLINICAL FACILITY

NAME OF FACILITY San Valley Specialty Health care (Totally Kids) DATE OF EVALUATION: 2-22-16
CLINICAL INSTRUCTOR: [REDACTED] BATCH #: 43

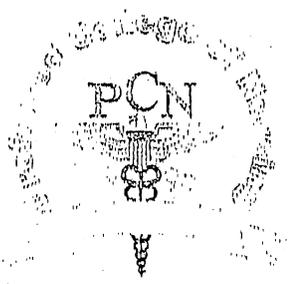
Purpose: To assess the viability of the experience and training the students have received from the board-approved clinical facilities and to provide feedback with suggestions on how to address issues of concern identified:

- | <u>Yes</u> | <u>No</u> | |
|-------------------------------------|--------------------------|--|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 1. The unit is clean and orderly. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 2. Equipment and supplies are available when needed. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 3. Staff members demonstrate professional behavior and respect to students. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 4. Staff members are accessible when needed. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 5. Environment is conducive to clinical experience. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 6. Provides opportunity to meet clinical objectives. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 7. Students meet clinical experience that is correlated to presented theory instruction. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 8. There's adequate work space and designated parking space |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 9. There's adequate security provided |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 10. Students are given opportunity to interact with patients |

Area(s) that should be improved or changed at the clinical site that would be helpful for students to get a more applicable experience:

Would I recommend this facility for future students? Yes No

Other Comments:



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FACULTY EVALUATION OF CLINICAL FACILITY

NAME OF FACILITY Montrose HCL DATE OF EVALUATION: 2/24/16

CLINICAL INSTRUCTOR: [REDACTED] BATCH #: _____

Purpose: To assess the viability of the experience and training the students have received from the board-approved clinical facilities and to provide feedback with suggestions on how to address issues of concern identified:

- Yes ___ 1. The unit is clean and orderly.
- Yes ___ 2. Equipment and supplies are available when needed.
- Yes ___ 3. Staff members demonstrate professional behavior and respect to students.
- Yes ___ 4. Staff members are accessible when needed.
- Yes ___ 5. Environment is conducive to clinical experience.
- Yes ___ 6. Provides opportunity to meet clinical objectives.
- Yes ___ 7. Students meet clinical experience that is correlated to presented theory instruction.
- Yes ___ 8. There's adequate work space and designated parking space
- Yes ___ 9. There's adequate security provided
- Yes ___ 10. Students are given opportunity to interact with patients

Area(s) that should be improved or changed at the clinical site that would be helpful for students to get a more applicable experience:

Would I recommend this facility for future students? Yes ___ No

Other Comments: Excellent place to work/learn



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PROGRAM DIRECTOR'S CLINICAL VISIT

This clinical visit is conducted s to provide training follow-up, monitor and evaluate the implementation of the program's clinical experience policies and procedures; to assess the viability of the experience and training the students have received from the board-approved clinical facilities; and to provide feedback with suggestions on how to address issues of concern identified during the visit.

The Program Director conducts observation and evaluation of students' clinical experience and performance as well as their instructor's ability to carry out assigned clinical objectives for the day.

The Program Director meets with the Director of Nursing, supervisor, or with some of the available staff, to conduct interviews to get their assessment, opinions, and comments on the performance and behavior of students and their clinical instructor.

NAME OF FACILITY [REDACTED] DATE OF VISIT: 2-26-16

Yes No CLINICAL INSTRUCTOR:

- 1. Provides student with facility orientation.
- 2. Facilitates guidelines and resources for performing clinical objectives for the day.
- 3. Begins and dismisses the clinical session on time.
- NA 4. Use the time efficiently by assigning and monitoring student's performance.
- 5. Conducts pre and post-conferences.
- 6. Evaluates students if they have achieved clinical objectives.
- 7. Assigns clinical experience that is correlated to presented theory instruction.

Yes No STUDENTS:

- 1. Report to the facility on time.
- 2. Leave the facility before the dismissal time.
- NA 3. Take direction and work under supervision of clinical instructor.
- 4. Adhere to established facility standards.
- 5. Adhere to school dress code policy.
- 6. Perform task within the boundaries set by the school and facility.

Yes No FACILITY:

- 1. Provides experience to meet clinical objectives.
- 2. Provides clinical experience that complements and enhances school training.
- 3. Provides opportunity to interact with patients.
- 4. Provides adequate work space for pre and post-conference.
- 5. Provides adequate parking space for students.

Area(s) that should be improved or changed at the clinical site that would be helpful for students to get a more applicable experience: *Only few patients being seen. Hours have been reduced. Dr. plans on retiring*

Would I recommend this site for future students? Yes No

Plan on removing this clinic from Rotations

Other comments:

Evaluated by: *E. E. [Signature]*

RESPONSE TO VIOLATION # 3

LIST OF RESOURCES FOR COUNSELING

Listing of Counseling Resources – p. 1

Picture of list posted in mail hallway – p. 2-3

**Acknowledgment of Receipt by
Students of list of Resources – pp. 4 - 14**

RESPONSE TO VIOLATION # 4

STUDENT PROGRESS POLICY

POLICY – pp. 1 - 3

**Acknowledgment of Receipt from
Students in current Class 44 – pp. 4 - 14**

VOCATIONAL NURSING PROGRAM STUDENT PROGRESS POLICY

By the end of the course, you MUST receive 76% as a final grade in order to pass. In each Term the clinical scale will be pass or fail, using the Clinical evaluation tools. A student must pass both clinical and theory in order to progress to the next Term.

To figure your grade, multiply your percent on the item x % of grade this will give you a number. The total of all the numbers is your percent of 100 which translates into the grade given below.

ITEM/DATE	% OF GRADE	YOUR%	CONTENT
Test #1	1.5%		
Test #2	1.5%		
Test #3	1.5%		
Test #4	1.5%		
Test #5	1.5%		
MID-TERM EXAM	25%		
Test #6	1.5%		
Test #7	1.5%		
Test #8	1.5%		
Test #9	1.5%		
Test #10	1.5%		
PHARMACOLOGY EXAM	20%		
FINAL EXAM	35%		
HOMEWORK	5%		
TOTAL	100%		

Grades will be given based on Preferred College of Nursing standards:

A=90-100

B = 80-89

C = 76-79

Below 76% is not acceptable and constitutes failure.

Clinical/Skills Lab are graded on a pass/Fail basis. You must pass your clinical portion in order to advance to the next Term.

	POSSIBLE	YOUR RESULT	CONTENT
TERM	PASS / FAIL		

Remediation Policy and Plan

- Students must satisfactorily complete each Term of the program before progressing to the succeeding Terms.
- Tests are usually administered every week. Students who do not pass a test will be required to attend remediation when scheduled by instructor. This is usually in the same week on Friday but can be a different day or week to meet college scheduling convenience. If a student is absent for the test, they must take that test within one week from the date it was first scheduled. It is the student's responsibility to schedule the test and remediation with the theory instructor. The highest grade that can be received from a missed test is 76%. If the student does not retake the test within a week, they will automatically receive a zero.
- If a student scores less than 76% on a UNIT EXAM (i.e., Mid Term, Final, Pharmacology), he/she will be required to remediate and take a makeup exam that reflects the content area of the failed unit exam. The student is required to score at least 76%. Even if the score from the re-test is higher, the student will only be credited with a score of 76%.
- Failure to comply with this remediation process will result in grade of "0" (ZERO) for the unit exam requiring remediation.
- An Instructor, at their discretion, will occasionally plan a unannounced "pop" quiz with the purpose of assessing the students' understanding of the subject being covered. These are not entered in the official grade calculations but are important in monitoring the students' progress.

Non-Compliance Notice

A student who does not maintain the minimum grade of 76% will be issued a "Non-compliance notice" to formally be notified of their need to improve their grades. See form below. A Non-Compliance notice can be given for:

Low grades
Attendance deficiencies
Poor Attitude
Unprofessional Appearance
Unprofessional Conduct
Unsatisfactory clinical skills
Incomplete/late Assignments
Poor Attitude

NON-COMPLIANCE NOTICE

Student: _____ Date: _____ Term (circle): 1 2 3 4 5

<input type="checkbox"/> Attendance deficiency <input type="checkbox"/> Poor Attitude <input type="checkbox"/> Low Grades <input type="checkbox"/> Incomplete/late Assignments	<input type="checkbox"/> Conduct Unprofessional <input type="checkbox"/> Unprofessional Appearance <input type="checkbox"/> Clinical Skills Unsatisfactory <input type="checkbox"/> OTHER
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COMMENTS by Instructor:

Situation:

Action:

<input type="checkbox"/> Placed on Attendance probation (circle) 1) missed two or more days of theory 2) missed one or more days of skills/clinical until the end of current Term.
<input type="checkbox"/> Placed on Conduct probation until _____,
<input type="checkbox"/> At risk of failure for not meeting educational objectives in (circle): theory / clinical
<input type="checkbox"/> Placed on probation due to violation of dress code standards

You are being given *formal notice* that you are non-compliant with established policies of Preferred College of Nursing and not meeting the minimum expected educational objectives. You are required to correct non-compliance, i.e. make up attendance, meet dress code, meet educational standards of the college, or other action as directed. Continued non-compliance can result in termination from the program.

Instructor/Program Director: _____ Date: _____

Student: _____ Date: _____

STUDENT COMMENTS

<p>Plan of Action:</p> <p>(Continue on back page if necessary)</p>
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NON-COMPLIANCE NOTICE

Student: _____ Date: _____ Term (circle): 1 2 3 4 5

<input type="checkbox"/> Attendance deficiency <input type="checkbox"/> Poor Attitude <input type="checkbox"/> Low Grades <input type="checkbox"/> Incomplete/late Assignments	<input type="checkbox"/> Conduct Unprofessional <input type="checkbox"/> Unprofessional Appearance <input type="checkbox"/> Clinical Skills Unsatisfactory <input type="checkbox"/> OTHER
---	--

COMMENTS by Instructor:

Situation:

Action:

- | |
|--|
| <input type="checkbox"/> Placed on Attendance probation (circle) 1) missed two or more days of theory 2) missed one or more days of skills/clinical until the end of current Term.
<input type="checkbox"/> Placed on Conduct probation until _____
<input type="checkbox"/> At risk of failure for not meeting educational objectives in (circle): theory / clinical
<input type="checkbox"/> Placed on probation due to violation of dress code standards |
|--|

You are being given formal notice that you are non-compliant with established policies of Preferred College of Nursing and not meeting the minimum expected educational objectives. You are required to correct non-compliance, i.e. make up attendance, meet dress code, meet educational standards of the college, or other action as directed. Continued non-compliance can result in termination from the program.

Instructor/Program Director: _____ Date: _____

Student: _____ Date: _____

STUDENT COMMENTS

<p>Plan of Action:</p> <p>(Continue on back page if necessary)</p>
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RESPONSE TO VIOLATION # 5

PROPOSED ATTENDANCE AND

MAKE-UP POLICY

POLICY – pp. 1 - 5

PREFERRED COLLEGE OF NURSING – VAN NUYS
Proposed Attendance Policies

Attendance/Absence Policy

Preferred College of Nursing emphasizes the need for all students to attend classes on a regular and consistent basis. Regular attendance and punctuality will help students develop good habits and attitudes necessary to compete in a highly competitive job market. Attendance is recorded on a daily basis and excellent attendance will enhance a student's employability.

- ❖ Students are required to attend all scheduled classes.
- ❖ Failure to meet clinical objectives due to excess absences will result in probation or dismissal from the program.
- ❖ Students having **missed 16 hours or more** within a term will be placed on attendance probation for the remainder of the term. Students who miss any more time while on probation will be dismissed. Students are able to complete the VN appeal process to remain in the program. If any more time is missed while pending their appeal, student will be dismissed from the program. Student may continue to attend class pending their appeal, but the appeal must be completed within one week of the last absence.
- ❖ Students will have to make up ALL missed hours prior to progressing to the next term.
- ❖ Students' failure to maintain improved attendance may result in dismissal from the program.
- ❖ A no call, no show to clinical results in a compromise of client care and can be construed as client abandonment. Therefore, a student who is a no call, no show to clinical will be placed on misconduct probation. A second occurrence will result in the student being dismissed. The student is able to complete a VN appeal form to remain in the program. Students may continue to attend class pending appeal, but appeal must be completed within one week of last absence. In cases of emergency, documentation must be presented as to why the student was unable to call to notify of absence.
- ❖ Students are responsible for obtaining missed content, remediation assignments, test retakes (when allowed), and any other requirements established by the instructor.

Absence/Tardy Reporting Policy

Theory

- ❖ Each student is responsible for keeping track of their missing theory hours.
- ❖ Each student is responsible for calling their theory instructor prior to the start of class to notify of the absence. If the theory instructor is unable to be reached, the student will call the college office staff. If the staff is unavailable, the student will call the ADON (in the DON's absence) and leave a voicemail message with a valid telephone number.
- ❖ The theory instructor will notify the DON or ADON (in the DON's absence) in their daily report.
- ❖ A record of absence will be placed in the student record daily.
- ❖ It is the student's responsibility to keep a copy of their make-up hours
- ❖ The make-up hours will be filed in the student record by the DON or ADON or designee.
- ❖ Theory instructor will notify DON or ADON or designee (in the DON's absence) of student tardies on a daily basis.
- ❖ Tardies will be recorded in student files.

Clinical

- ❖ Each student is responsible for keeping track of their missing clinical hours.
- ❖ Each student is responsible for calling their clinical instructor prior to the start of class to notify of the absence. If the clinical instructor is unable to be reached, the student will call the college office and speak to the staff. If the staff at the college office is unavailable, the student will call the ADON or DON and leave a voicemail message with a valid telephone number. If a student does not notify a program representative prior to the start of clinical, student may be given a non-compliance notice.
- ❖ The clinical instructor will notify the DON or designee (in the DON's absence) the day of the student absence.
- ❖ A record the absence will be placed in the student record daily.
- ❖ The make-up hours will be filed in the student record.
- ❖ Clinical instructor will notify the DON or ADON or designee (in the DON's absence) of student tardies in their daily report.
- ❖ DON or ADON or designee will record tardies in student files (**see Tardy Policy**).

Tardiness and Leaving Early

Classroom Policies

- ❖ Tardiness and leaving early disrupt the learning environment and is discouraged. The student will be marked tardy after 5 minutes from start of the class. If a student exceeds 15 minutes late, that time will be counted towards time missed in class that requires make up of hours/objectives.
 - Three tardies in a term is equivalent to one full day absent to make up in the skills lab/computer lab or additional clinical time under the direction of the instructor. The missing hours will be counted toward absence hours.

If a student is tardy a fourth time in the term, the student will be placed on attendance probation. If a fifth occurrence happens, a student may be dismissed from the program.

Clinical Policies

- Students arriving more than five (5) minutes after the scheduled arrival time will be sent to campus. They must check in with the DON or designee and the day will be counted as an absence.
- The entire clinical day must be made up within two weeks. The make-up policy must be followed. The make-up cannot occur the same day as the absence.
- ❖ Students may not leave the clinical site before the designated time except in cases of emergency in which case the instructor and clinical site must be informed.
- ❖ Students must remain on-site for all breaks and mealtimes while in clinical, unless authorized by the clinical instructor.
- ❖ Students leaving the clinical site without authorization from a clinical instructor and/or not reporting off to a designated member of the facility may be grounds for termination from the program.

Make-Up Policy

All missed hours (Clinical and Theory) must be made up prior to advancing to the next term. If a student schedules a make-up and is unable to attend, they will have an additional make up required equal to twice the number of hours missed. For example, if you are scheduled for an eight hour make up clinical day and are absent for any reason, you will have to make up 16 hours of clinical time.

ACCEPTABLE METHODS for make-up include and must be assigned and pre-approved by instructor:

- (1) Theory: attendance at remediation session scheduled, case studies, written examination, attendance at seminars or workshops, auto tutorial laboratory, and research reports.
- (1) Clinical: performance evaluation in skills laboratory or additional time in the clinical area with clients/patients. Approved clinical experience related special projects, i.e. health fair, home health observation and report.

Students who have not completed all course objectives (theory and clinical) prior to the Completion of the Vocational Nursing Program will not progress to next term or, if in their last term, will not graduate.

Theory Hours Make-up

In order to be eligible for licensure, as graduates of Preferred College of, students are required to complete all hours designated as required hours for graduation.

Students who miss theory hours need to make up the hours.

Theory Instructors can assign theory make-up hours or written work on the subject matter missed. This work is in addition to requiring attendance at remediation scheduled session. Written work can consist of the following:

- o Academic Care Plans
- o Essays
- o NCLEX system testing along with written assignments

When giving homework assignments, theory instructor will complete and give student a make-up form with date and hours of theory missed and an anecdotal note specifying what the makeup assignment consists of and a due date. Theory hours must be made up no later than two weeks after absence. The STUDENT is responsible to insuring that this is accomplished and must request make-up required.

Failure to complete assigned work may result in incomplete grade for the term and failure to progress to the next term.

Clinical Hours Make-Up

In order to be eligible for licensure, Vocational Nursing students are required to complete hours designated as required for graduation from the program.

Clinical absences must be made up within 2 weeks of the absence and all hours must be completed before the end of each term before progressing to the next term.

Students with clinical absences will make up clinical hours by any of the following methods:

- o Assignment to clinical make up days that are coordinated by nursing administration at anytime deemed necessary. Make-up location may be at a different facility or other clinical experience as assigned by the program.
- o MAKE UP FORMS AND MAKE UP SCHEDULE: These need to be signed off as completed by theory or clinical instructor as appropriate.
- o Participation in health fairs, disaster drills or hospital volunteer functions as arranged by nursing administration and area hospitals.
- o Nursing lab hours on campus.

The student will bring to the Clinical instructor a make-up form to complete. It will indicate the date and hours of clinical missed and a due date for make-up. Clinical hours must be made up no later than two weeks after absence.

Failure to attend a scheduled clinical make-up without notification will constitute addition scheduled clinical hours or an incomplete grade and inability to progress in the program.

NOTE: Students may be required to do make up theory or clinical hours on the weekends.

RESPONSE TO VIOLATION # 6

Part I – Documentation of Materials for Maternity & Pediatrics

List of supplies p. 1

Receipts p. 2

Pictures of items pp. 3 – 8

Items paid Receipts awaiting

Delivery pp. 9 – 16

Part II – Computer Lab with 20 computer stations Pictures – p. 17-28

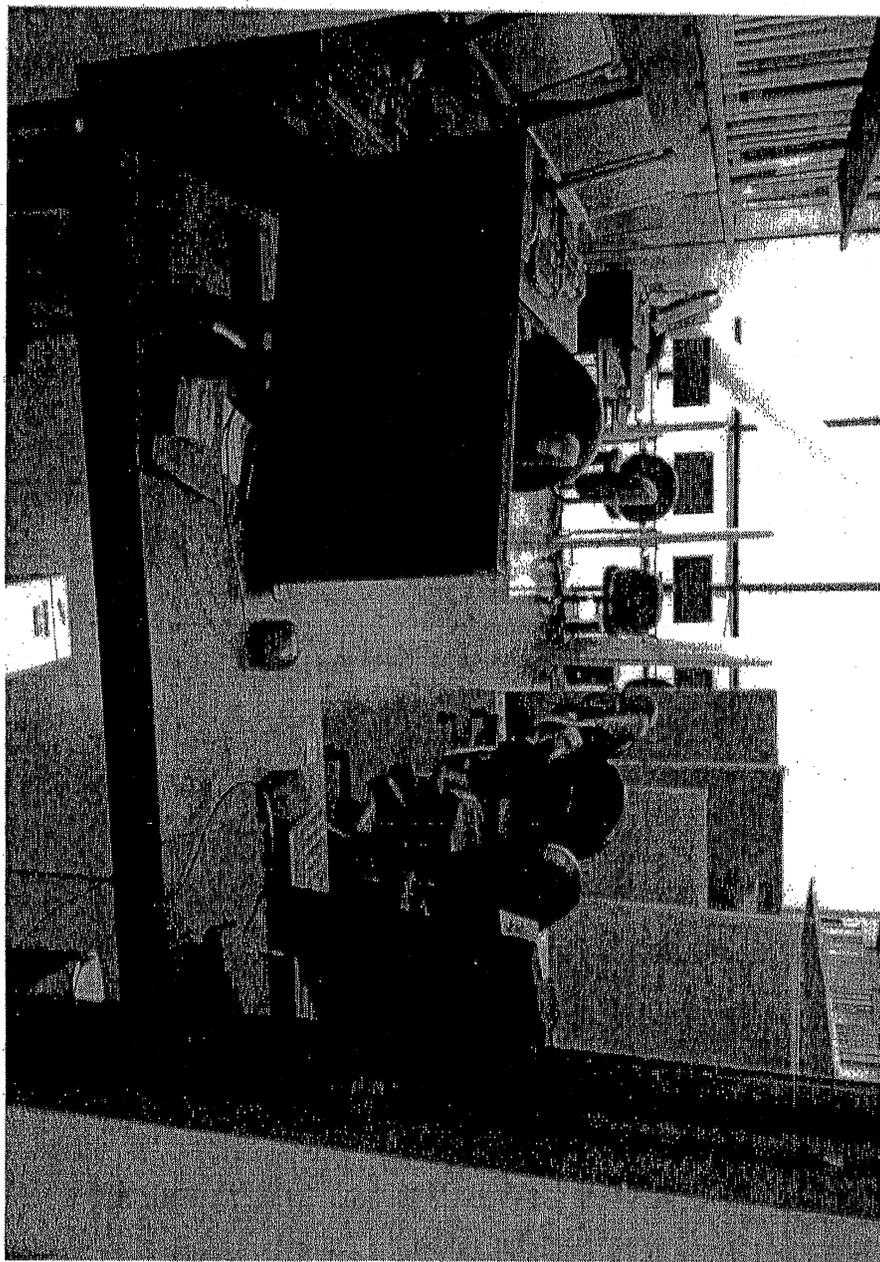
PEDIATRIC & MATERNITY NURSING SKILLS SUPPLIES AND EQUIPMENT

PEDIATRIC NURSING:

1. Baby bath tub
2. Newborn cradle
3. Baby diapers
4. Nursing pads
5. Feeding bottles
6. Baby wipes
7. Breast pump
8. Baby blanket
9. Newborn hats
10. Nasal aspirator
11. Tape measure
12. Breastmilk storage bags
13. Newborn doll
14. Baby doll
15. Newborn resuscitation doll
16. Lancets for infants
17. Paper tape measure
18. Newborn stethoscope *ordered*
19. Newborn blood pressure apparatus *ordered* } p. 15-16

MATERNITY

1. Fetus model
2. Pelvis model
3. Placental model
4. Vaginal contraceptive gel
5. Lubricating jelly
6. Condoms
7. Pregnancy Test Kit
8. Foley catheter
9. Bedpan
10. Shaving cream
11. Blade razors
12. OB-Gyne Wheel Pregnancy *ordered - p. 9-10*
13. Vaginal speculum *ordered p. 11-12*
14. Umbilical cord *ordered p. 13*
15. Umbilical clamp *ordered p. 13-14*



Picture of computer lab (20 computers)

RESPONSE TO VIOLATION # 7

NEED FOR WRITTEN PLAN WITH OBJECTIVES,

PLAN FOR ADMINISTRATION

Preferring College of Nursing

Program Development Plan 2016

Program Director's Report

Submitted by Elizabeth Estrada, MSN, RN

March 1, 2016

KEY ELEMENT	ASSESSMENT POINTS	STRATEGIC PLANNING & TIMING
<p>A - GENERAL ANALYSIS</p> <p>The Nursing Program is part of a bigger organization which contains the following elements of its business:</p> <p>Operations Systems Organization Process Positioning</p> <p>All of these affect the nursing program and its effective performance.</p>	<p>CHALLENGES</p> <p>It has only been a short period of time that Program Director has been managing program. Structures, curriculum, policies, and staff needing to be re-assessed and updated. In many areas, Director has identified the need for major revisions</p> <p>POSITIVE FACTORS</p> <p>New owners/ investor extremely supportive of program development and operations.</p> <p>A new location has been secured with adequate areas for growth and real estate development. It is located within a mile of the former location which does not affect the students' travel convenience.</p>	<p>A sequential ordered strategy for review of the entire program which is taken in stages is paramount. This includes curriculum, school culture, administrative operations, faculty knowledge/skills, healthcare agencies, and community agencies.</p> <p>Immediate plan: Identify best data collection strategy to assess program success, plan on how to analyze and report data to faculty.</p> <p>Overview College annual business plan 2016-2017:</p> <ol style="list-style-type: none"> 1) prioritizing educational program offerings and then begin reorganization, consolidation or elimination of unnecessary program content; 2) understanding current/past processes, policies, and procedures and then streamlining and standardizing them; 3) assessing all administrative functions (School wide) in efforts to reduce waste and consolidate services where possible; 4) improving the working climate of the School; 5) improving our relationships with internal and external partners; 6) improving technical support and resources; and, 7) improving the student experience.

		<p>Long Term Business Plan: 1) deliver education in new and different ways; 2) identify new means for increasing revenue and creating a more stable School financial base; 3) create faculty and staff development opportunities and support; 4) create a consistent staff and faculty human resource classification and compensation plan; and, 6) develop a long-term plan to become more self-supporting.</p>
B - INTERNAL ELEMENTS	<p>CHALLENGES</p> <p>Transition status in interim period as new owners/ investors brings former issues and program weaknesses that must be dealt with even though new management group has no power to effect positive change.</p> <p>POSITIVE FACTORS</p> <p>Staff commitment is strong, most staff has long history of loyalty to program.</p> <p>Room for growth in current physical location.</p>	<p>By May 2016, the organizational and business transition from former owner and new owners will be in final stages. A solid business plan can thus be implemented eliminating former financial and management issues.</p>
C - EXTERNAL ELEMENTS	<p>CHALLENGES</p> <p>Students that have been in previous "batches" are still showing up as "outliers" and taking the NCLEX exam for the first time. This has been resulting in PCN poor pass rates.</p> <p>POSITIVE FACTORS</p> <p>Collaborative relationships have been created with other Southern California Directors to share effective success strategies.</p>	<p>The Director will continue to be actively involved with the SoCal Directors of Vocational Nursing. In addition, the Director will reach out to programs that have high pass rates to consider incorporating strategies that could effect an improvement in pass rates for PCN students.</p> <p>The Director has recently established personal relationships and accomplished visits to all approved clinical facilities. With former relationships with other clinical facilities and community organizations, the director will dedicate time to developing these relationships further. Because of the Director's long time</p>

		relationship with the American Red Cross (had been on a national disaster committee), the director plans on creating meaningful community experiences that directly relate to health and human services.
D - APPROVALS AND REGULATIONS	<p>CHALLENGES</p> <p>BVNPT Nursing Education Consultant positions are limited which has resulted in too many colleges assigned to each NEC. Consequently, NEC are unable to take on role of support and advisement to this program.</p> <p>POSITIVE FACTORS</p> <p>The Director is getting support and assistance with information needed for required reports to address:</p> <ol style="list-style-type: none"> 1) violations identified during surprise campus visit, 2) request for the new class at the BVNPT board meeting in May 2016. 	<p>Only ten students were approved in January BVNPT board meeting. The college withdrew its request for twenty part-time students to replace the 18 students graduating from its last part-time program.</p> <p>The plan is planning to submit a request for 20 students in the BVNPT May board meeting. Hopefully the curriculum revisions that are submitted will be approved. This will provide an updated curriculum (see section G below) with an improved content structure.</p> <p>ABHES and BBPE relationships are consistent with updating being done currently.</p>
E - MARKETING AND RECRUITMENT	<p>CHALLENGES</p> <p>It was difficult in the beginning of the marketing period to recruit enough students for the college to have a large number of students to choose from. The ten students were approved just before Thanksgiving. Recruitment was accomplished during December and throughout the holiday season for a start date of January 11, 2016.</p>	<p>Active Current Action in Progress:</p> <p>The prospective students are being actively communicated with to help them plan for a future admission date. We have a significant number of prospective students on waiting list for a projected part-time class. Should we get approved for 20 students, we will have plenty of prospects to choose from.</p> <p>Some have elected to enroll in the CNA program and are currently in classes with the support of the local WorkSource center. In addition, we have a significant number of prospective students on waiting list for a projected part-time class.</p>

	<p>POSITIVE FACTORS</p> <p>An experienced student affairs and recruitment professional was hired who had previously worked with the Director. She and the rest of the staff was extremely proactive and able to meet the goal of 11 students enrolled.</p>	<p>Timeline: Meetings with WorkSource center will happen quarterly (at the very least) and more frequently as necessary.</p> <p>Because of the local and active relationship that the management/owners have with local, state, and regional representatives, the college is well positioned to capture the public interest.</p>
<p>F - FACULTY AND STAFF DEVELOPMENT</p>	<p>CHALLENGES</p> <p>Director has not had the ability to evaluate clinical faculty due to arriving when no students were in clinical rotation.</p> <p>POSITIVE FACTORS</p> <p>Theory instructor has been assessed and student feedback in the new full time class 44 has been very positive.</p>	<p>A staff meeting is planned in March to review all new policies and procedures to ensure that the implementation of student management is consistent among faculty.</p> <p>Each instructor will have student and director evaluations accomplished after each course and each clinical rotation.</p> <p>Once the curriculum is approved (projected to be by April or May), the faculty will have a curriculum workshop to review content and provide tools and resources. ATI is planning on taking approved curriculum and reorganizing the tools to correlate with content structure.</p>
<p>G - PROGRAM CONTENT EVALUATION</p>	<p>CHALLENGES</p> <p>Curriculum needs revisions to update and incorporate context relevant content.</p> <p>POSITIVE FACTORS</p> <p>Faculty is enthusiastic about the reorganization of the curriculum. Their input is actively sought by the Director even with the implementation of the current curriculum. Although outdated, faculty has sought ways to provide enhancements to the content being taught in the first term.</p>	<p>An organized and deliberate review of all components of the curriculum is being accomplished. Specific attention will be paid to evidence based and context relevant content.</p> <p>Curriculum revision started in September 2015 upon arrival of the current Director. However, it was agreed with the NEC that other priorities would be addressed first, i.e. Response to former violations, Student Progress Policy Revision and implementation, Prep for November Board Meeting, and Annual Report.</p> <p>It is the belief of the current Director that the development of the curriculum is an ongoing nursing education activity. It must be patient centric, culturally interactive, technologically current, and health industry reactive. Therefore, the plan for proactive</p>

		<p>enhancements on a frequent basis will be part of the philosophy of the nursing education department.</p> <p>A revised curriculum will continued to be revised and then submitted for approval by March 13th (or sooner) with the request for a new class at the May BVNPT board meeting.</p> <p>More data and information is inherent in the separate report from this document.</p>
H – STUDENT MANAGEMENT AND COMMUNICATIONS	<p>CHALLENGES</p> <p>The current director identified poor implementation of college policies and disciplinary procedures regarding poor performing students.</p> <p>POSITIVE FACTORS</p> <p>Since the class only has ten students, the faculty and Director can easily track student progress thereby planning tutoring and remediation when necessary.</p>	<p>The Director and faculty will meet with each students at least quarterly to review status of students grades, study skills, use of resources, and faculty support. Any necessary remediation will be established and monitored actively.</p> <p>At-risk-of-failure students will be counseled more frequently when necessary. They may be placed on probation and a non-compliance notice will be given to the student in writing with necessary actions needed to maintain a satisfactory grade. The Student Progress Policy was provided to each student and policy was included in Catalog.</p>
I – HEALTH CARE AGENCIES / FACILITIES	<p>CHALLENGES</p> <p>Upon arriving as Program Director, the operations and staff were actively securing additional needed clinical facilities. The number needed for the then “batch 43” was insufficient.</p> <p>POSITIVE FACTORS</p> <p>The projected new owners had previously established relationships with various clinical facilities. These relationships facilitated access to necessary facilities to fulfill required clinical hours.</p>	<p>The current facilities engaged are adequate for the current class of ten students.</p> <p>During the last week of February, 2016, new facilities were submitted for approval. By March 13th (or sooner) additional facilities will be submitted in order to accommodate the anticipated new class after approval from the BVNPT board.</p> <p>As soon as we have more students, there will be a campaign to acquire more acute hospitals to include in our clinical rotations.</p>

	<p>We are located in the same building that a maternity clinic and home care agency are located.</p>	
<p>J - COMMUNITY AGENCIES</p>	<p>CHALLENGES</p> <p>There are no major challenges for the college in this area.</p> <p>POSITIVE FACTORS</p> <p>The management and Director has strong relationships with many facilities. As soon</p> <p>Program Director has history of participating in a large health care clinic offered yearly by CareHarbor where the Director is able to secure meaningful experience for the students.</p>	<p>In late September and October, the massive health clinic will be held in Los Angeles for the fifth year "CareHarbor". The students will be taking histories, documenting assessments, and deciding triage priorities to almost 4000 underserved health care clients in the LA area.</p>

Agenda Item #12.A.7., Attachment H

Johnson, Donna@DCA

From: Johnson, Donna@DCA
Sent: Tuesday, March 01, 2016 1:37 PM
To: 'elizabeth@pcn.edu'
Subject: FW: Submission of five maternity clinics for approval
Attachments: Century Women's Medical Group-Pico Union.pdf; Century Women's Medical Group-Bellflower.pdf; Community Prenatal and Medical Clinic-Huntington Park.pdf; Century Women's Medical Group-Century City.pdf; Century Women's Group-Los Angeles.pdf

Elizabeth –

The Board of Vocational Nursing and Psychiatric Technicians (Board) is in receipt and has reviewed the attached clinical facility applications. The applications were submitted to the Board on February 24, 2016. The applications all indicate a start date prior to any possible approval date. As such the applications cannot be approved. In addition, after speaking with the designated contact, [REDACTED], note the following regarding these medical offices:

- 1) The Pico Blvd office will accept no more than two students and the instructor at one time. The reported maximum daily census of maternity patients is 35 per day. You have listed 3 students and 40 patients. The site has 1 or 2 providers at a time.
- 2) The Century Park office will accommodate up to 2 students with one instructor and has an average daily maternity census of 10-15 patients per day. You have listed 2 students and 25 patients per day. However, maternity care is NOT available every other Wednesday, every other Thursday and Friday afternoons.
- 3) The Cesar Chavez office has an average daily maternity census of up to 20 patients per day and would accommodate no greater than 2 students with 1 instructor at any given time. You have indicated a census of 30 patients and 3 students. Clinic hours are 9-5 and you have indicated 9-6.
- 4) The Florence office reports an average daily census of 15-20 maternity patients per day and they will accommodate up to 2 students at a time with 1 instructor. You have indicated 2 students and a census of 25 maternity patients per day. However, the office has no provider on Fridays and so patients are not seen that day. Further, according to the office, hours of care are 9-3 on M, T, W, Th.
- 5) The Lakewood office reports approximately 25 maternity patients per day and that they will accommodate no more than 2 students at a time with an instructor. You have indicated 30 patients per day and 3 students.

Further, please note that you may wish to review the listed clinical objectives with the contact and with the sites so that objectives can be verified. As the program director, you will wish to engage in that process yourself so that a nurse familiar with the LVN scope of practice is involved with planning and scheduling clinical experiences for vocational nursing students. The designated contact at the site described communication with a school administrator who is not a nurse.

Please contact me should you have any questions.

Donna

Donna G. Johnson, RNP, MS, MA
Nursing Education Consultant
Board of Vocational Nursing and Psychiatric Technicians
2535 Capitol Oaks Drive, Suite 205
Sacramento, CA 95833
Email: donna.johnson@dea.ca.gov
Phone: 916-263-7842
Fax: 916-263-7866

From: elizabeth@pcn.edu [mailto:elizabeth@pcn.edu]
Sent: Wednesday, February 24, 2016 9:51 PM
To: Johnson, Donna@DCA <Donna.Johnson@dca.ca.gov>
Subject: Submission of five maternity clinics for approval

Dear Ms. Donna Johnson,

We are re-submitting five maternity clinics sent last year. They were on hold because we did not need them for our current ten students enrolled.

Because of our upcoming request for a new cohort, I am attaching the maternity clinics with clinical objectives and orientation for each clinic.

Please let me know if there are any questions. Thank you.

High Regard,

Elizabeth Estrada, MSN, RN
Program Director
Preferred College of Nursing - Van Nuys

Agenda Item #12.A.7., Attachment I



ACCREDITING BUREAU OF HEALTH EDUCATION SCHOOLS
7777 Leesburg Pike, Suite 314 N. Falls Church, Virginia 22043
Tel. 703/917.9503 Fax 703/917.4109 E-Mail: info@abhes.org

February 8, 2015

ID#: I-320

**FEDERAL EXPRESS SIGNATURE REQUIRED
& ELECTRONIC SUBMISSION TO bsanchez@pcn.edu**

Ms. Bernardita Sanchez
President
Preferred College of Nursing
7400 Van Nuys Boulevard, Suite 207
Van Nuys, CA 91405

Dear Ms. Sanchez:

The Commission, at its January 2016 meeting, reviewed your institution's application for a continued grant of accreditation, including the Self-Evaluation Report, the on-site Visitation Report, the institution's response to the report, and the institution's response to the August 3, 2015 show-cause letter. Based on review and discussion, the Commission acted to defer action on the application for a continued grant of accreditation, and to direct the institution to continue to **show cause why its accreditation should not be withdrawn**. The institution's current grant of accreditation is extended through August 31, 2016.

A show-cause directive is not an adverse accreditation action, but serves as notification that absent corrective action and information by and from the institution or program to address specific compliance concerns, accreditation status will be in jeopardy¹. This show-cause directive and deferral of action on the application for accreditation are the result of failure of the institution to demonstrate compliance with the standards and provides a further opportunity for the institution to respond to the findings of noncompliance as outlined below:

1. An institution demonstrates that it has the financial resources to ensure continuity of operation and to fulfill its obligations to students and employees (IV.B.1); and, an institution demonstrates that it meets the minimum current ratio, profitability, and net worth requirements (IV.B.2.).

The institution is directed to submit sufficient information and documentation to show compliance with these standards, including, but not limited to, the following:

A detailed explanation of precisely how and when the institution expects to be in compliance with Standard, IV.B.2. This explanation must include an updated Financial Improvement Plan that details the institution's financial objectives, outlines how the institution plans to achieve compliance, and specifies timelines for when compliance will be achieved.

As a reminder, the institution must submit a copy of its next audited financial statements no later than six months after the institution's fiscal year end.

2. Program enrollment is justified (V.A.1.); external clinical experiences are available to serve the diverse needs of a program(s) (for applicable programs) (V.B.4.a.); and, a program has clinical experiences to meet its goals and objectives (V.B.4.b.). (All programs)

¹ See generally ABHES Accreditation Manual, 17th Edition, p. 42.

The institution is directed to submit sufficient information and documentation to show compliance with this standard, including, but not limited to, the following:

Approved clinical facility applications from the Board of Vocational Nursing and Psychiatric Technicians for the following clinical sites: Montrose HealthCare Center, Ludmilla Bess, M.D., Rusiana Kadze, M.D., Rafik Latif, M.D., Clinica Medica San Miguel Vermont Aven, Los Angeles, Huntington Park, Washington Blvd and Main and Panaroma City.

The show-cause directive notifies the institution that should its response to this action, which may at the institution's election include an appearance before the Commission, fail to demonstrate compliance with these standards, the Commission may withdraw accreditation as its next possible action.

Further, given these concerns and as a means of protecting current and future students, **the institution is directed to submit to ABHES under separate cover and not as part of the materials submitted as response to this letter, an updated proposed teach-out plan, and the corresponding Teach-out Approval form** found under the Forms Tab on the ABHES website at www.abhes.org/forms which is consistent with applicable standards and regulations and provides for the equitable treatment of students. Include documentation of the following provisions in the submitted teach-out plan:

- a. The teach-out institution is accredited by an institutional accrediting agency recognized by the U.S. Department of Education.
- b. The teach-out institution is stable, carries out its mission and meets all obligations to existing students.
- c. The teach-out institution has the necessary experience, resources and support services to provide educational programs that are of acceptable quality and reasonably similar in content, structure, and scheduling to those provided by the institution or program that may cease operations either entirely or at one of its locations. This includes graduates' access to the same credentialing exams, as applicable.
- d. Students are provided access to the program and services without requiring them to move or travel substantial distances.
- e. Students will be treated equitably with regard to any charges or refunds; and, if tuition has been paid in full, that students receive the instruction promised at no additional charge.
- f. Students will be provided with written notification regarding their rights and opportunities for teach-out, transfer and refunds.

The plan may propose that the teach-out be accomplished by the institution that may cease operations, either entirely or at one of its locations, or by another institution(s) so long as the requirements listed above are met.

Please be aware of the maximum period of time the Commission may allow for an institution to be brought into compliance with ABHES requirements. Chapter III, Section C of the *Accreditation Manual* states, in part:

The Commission may in its discretion provide an opportunity for the institution or program to bring itself into compliance within a time period specified by the commission. That time period will not exceed:

Ms. Bernardita Sanchez

Page 3

February 8, 2016

- a. *Twelve months, if the longest program is less than one year in length.*
- b. *Eighteen months, if the longest program is at least one year, but less than two years in length.*
- c. *Two years, if the longest program is at least two years in length.*

If, as part of its response to this directive, the institution wishes to appear before a panel of the Commission, its request to appear must be submitted in hard-copy form to the ABHES office within 10 calendar days of the date of this letter. A \$3,000 personal appearance fee must accompany this request and a \$3,000 deposit for expenses will be required to be submitted 30 days prior to the appearance. The institution will be provided a summary of expenses following the hearing and will be refunded or charged the difference from the \$3,000 deposit. The institution has the opportunity to request a teleconference, in lieu of a personal appearance, which requires a \$2,000 fee to accompany this request, also due within 10 calendar days from the date of the Commission action.

Should the institution wish to appear, the appearance materials must be submitted in accordance with the Response Requirements outlined below.

Response Requirements

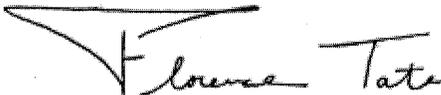
The institution's response to this letter, including the cover letter, narrative, exhibits, and the completed "Notice for Commissioner Recusal" form included with this letter, must be submitted on a USB (stick) drive or on a CD Rom, in accordance with the instructions "Preparing Your Institution's Response" found under the Forms Tab on the ABHES Website at www.abhes.org/forms. Please be advised, according to the instructions, electronic bookmarks must be used to identify supporting exhibits in the response. **A response, which does not include electronic bookmarked exhibits, will not be accepted.**

The response must be received by ABHES no later than **May 1, 2016**. It is imperative that the USB drive or the CD Rom is properly labeled with the (1) institution's name, (2) city/state, (3) ABHES ID #, (4) Response to February 2016 Show Cause Letter, and (5) date.

The institution is advised that failure to observe the Response Requirements or respond by the due date will result in a late-fee assessment in accordance with Appendix H of the *Accreditation Manual*.

If you have any questions concerning this correspondence, please contact me at (703) 917-9503.

Sincerely,



Florence Tate
Executive Director

Attachment: Notice for Commissioner Recusal

c: Amanda Ludwa, ABHES

*Logged
to D8*



April 14, 2016

Ms. Bernardita R. Sanchez, President
Preferred College of Nursing
7400 Van Nuys Boulevard, Suite 207
Van Nuys, CA 91405

2nd Day UPS Delivery
Tracking #: 1Z A87 964 02 9097 6538

Re: HCM2 Method of Payment
OPE ID: 04161300
DUNS: 128019507

Dear Ms. Sanchez:

The San Francisco/Seattle School Participation Division (SPD) has transferred Preferred College of Nursing in Van Nuys (PCN) from the Heightened Cash Monitoring 1 (HCM1) Method of Payment to the Heightened Cash Monitoring 2 (HCM2) method of payment effective April 14, 2016.

Under the HCM2 method of payment, PCN may continue to obligate funds under the federal student financial assistance programs authorized by Title IV of the Higher Education Act of 1965, as amended. PCN may disburse institutional funds to eligible students. If PCN disburses institutional funds, the U.S. Department of Education (Department) will reimburse it for properly documented expenditures. The Department reserves the right to offset any federal claims against funds due to PCN.

This action is authorized by Section 415 of the General Education Provisions Act, 20 USC 1216a-1, and by the following program regulations: 34 C.F.R. § 668.162, Student Assistance General Provisions.

The Department has taken this action due to the following reasons:

- Failure to submit Gainful Employment Reporting to the National Student Loan Data System (NSLDS), and
- The Department continues to have serious concerns regarding the institution's status with its accrediting and state authorizing agencies, as it pertains to the short term approvals granted to PCN.

Federal Student

PROUD SPONSOR OF
the AMERICAN MIND

50 Beale Street, Suite 9800, San Francisco, CA 94105-1863
StudentAid.gov

Enclosed are the detailed instructions for all HCM2 requests. Please address all submitted requests and inquiries to:

Terri Tom, Payment Analyst
U.S. Department of Education
San Francisco/Seattle School Participation Division
Federal Student Aid
50 Beale Street, Suite 9800
San Francisco, CA 94105-1863

Phone: (415) 486-5616
E-mail: Terri.Tom@ed.gov

Please note that the foregoing action does not preclude the Department from taking administrative action(s) against PCN.

If you wish to discuss this matter, please contact me at (415) 486-5605.

Sincerely,



Martina Fernandez-Rosano
Division Director
San Francisco/Seattle School Participation Division

Enclosures: Instructions for Obtaining Funds Under the HCM2 Method of Payment
STANDARD Form 270 (Request for Title IV Reimbursement or Heightened
Cash Monitoring)
Student Data Spreadsheet

cc: Ms. Jayzelle O. Napuli, Financial Aid Director
Accrediting Bureau of Health Education Schools, Accreditor
California Bureau for Private Postsecondary Education, State Authorizing Agency