

Agenda Item #19.B.1.



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

BOARD OF VOCATIONAL NURSING & PSYCHIATRIC TECHNICIANS
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COVER SHEET

SUBJECT: **American College of Nursing Psychiatric Technician Program –**
Reconsideration of Provisional Approval; Consideration of Request to
Admit Students. (Director: Felicidad Silva, Concord, Contra Costa County, Private)

The American College of Nursing Psychiatric Technician Program is presented for reconsideration of provisional approval. Additionally, the program requests approval to admit an evening class of 10 students to commence on December 12, 2016, with graduation expected on February 3, 2018. Denial of the program's request to admit an additional class and revocation of provisional approval are recommended.

Recommendations:

1. Revoke American College of Nursing Psychiatric Technician Program's provisional approval, effective January 30, 2017.
2. Remove the program from the Board's *List of Approved Vocational Nursing Programs*, effective January 30, 2017.

AGENDA ITEM #19.B.1.



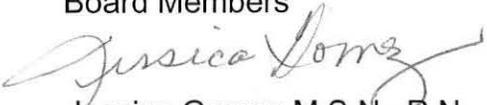
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DATE: October 20, 2016

TO: Board Members

FROM: 
Jessica Gomez M.S.N., R.N.
Nursing Education Consultant

SUBJECT: American College of Nursing Psychiatric Technician Program –
Reconsideration of Provisional Approval; Consideration of Request to
Admit Students. (Director: Felicidad Silva, Concord, Contra Costa County, Private)

The American College of Nursing Psychiatric Technician Program is presented for reconsideration of provisional approval. Additionally, the program requests approval to admit an evening class of 10 students to commence on December 12, 2016, with graduation expected on February 3, 2018. Denial of the program's request to admit an additional class and revocation of provisional approval are recommended.

The Board placed the program on provisional approval for the two (2) year period May 15, 2015, through May 31, 2017, due to noncompliance with regulatory requirements. The Board directed the program to correct and sustain correction of the eleven (11) identified violations. Further, the program was required to admit no additional students without prior approval by the Board. The violations, required corrections, and timeline for correction were specified in the *Notice of Change in Approval Status*, dated June 12, 2015.

On November 18 and 19, 2015, an unannounced onsite inspection of the program was conducted. At that time, four (4) of the previously identified violations remained uncorrected.

On February 5, 2016, the program was presented to the Board for reconsideration of provisional approval due to the continued failure to correct identified violations. The Board directed the program to be placed on the May 2016 agenda for reconsideration of provisional approval and possible revocation.

On May 13, 2016, the Board continued provisional approval for the American College of Nursing Psychiatric Technician Program through May 31, 2017. Additionally, approval of the program's major curriculum revision was granted.

On May 16, 2016, the program submitted documents including policies and procedures. If implemented as reported, all violations would be considered corrected.

On September 8, 2016 the program submitted a request to admit ten (10) students. During the evaluation of submitted documents one reoccurring (1) violation was identified.

On September 15, 2016, an unannounced program inspection was conducted **five (5) additional reoccurring violations were identified**. The program has a total of **six (6) current violations**.

History of Prior Board Actions

(See Attachment A, History of Prior Board Actions)

Enrollment

The full-time program is 52 weeks in length. Theory and clinical classes are offered during the day, evening, and on weekends. The program requires Board approval prior to the admission of each class.

The following table represents **current and projected** student enrollment based on current class starts and completions. The table indicates a **maximum enrollment of 16 students** for the period of **June 2014 through January 2017**.

ENROLLMENT DATA				
CLASS DATES		# Students Admitted	# Students Current or Completed	Total Enrolled
Start	Complete			
6/14 Day		6	6	0 + 6 = 6
	6/15 (6/14 Class)		-6	6 - 6 = 0
12/15 Eve	1/17	6	6	0 + 6 = 6
12/16 Eve PROPOSED	2/18	10	+10	10 + 6 = 16
	1/17 (12/15 Class)		-6	16 - 6 = 10

Licensing Examination Statistics

The following statistics, published by Psychological Services, LLC (PSI), for the period January 2012 through September 2016, specify the pass rate statistics for graduates of the American College of Nursing Psychiatric Technician Program on the California Psychiatric Technician Licensure Examination (CAPTLE) and variances from state average annual pass rates.

Psychiatric Technician Licensure Examination Data							
Quarterly				Annual Statistics*			
Quarter	# Candidates	# Passed	% Passed	State Average Pass Rate	Program Average Annual Pass Rate	State Average Annual Pass Rate [CCR § 2585(l)]	Variance From State Average Annual Pass
Jul - Sep 2012	1	0	0%	84%	67%	82%	-15
Oct - Dec 2012	No Candidates Tested			77%	67%	81%	-14
Jan - Mar 2013	No Candidates Tested			88%	50%	82%	-32
Apr - Jun 2013	No Candidates Tested			89%	0%	85%	-85
Jul - Sep 2013	1	1	100%	84%	100%	86%	+14
Oct - Dec 2013	1	1	100%	84%	100%	86%	+14
Jan - Mar 2014	No Candidates Tested			86%	100%	86%	+14
Apr - Jun 2014	1	1	100%	74%	100%	83%	+17
Jul - Sep 2014	1	1	100%	77%	100%	82%	+18
Oct - Dec 2014	No Candidates Tested			77%	100%	80%	+20
Jan - Mar 2015	No Candidates Tested			84%	100%	79%	+21
Apr - Jun 2015	No Candidates Tested			64%	100%	78%	+22
Jul - Sept 2015	8	4	50%	77%	50%	78%	-28
Oct - Dec 2015	1	1	100%	63%	56%	76%	-20
Jan - Mar 2016	No Candidates Tested			68%	56%	70%	-14
Apr - Jun 2016	4	1	25%	69%	46%	71%	-25
Jul - Sept 2016	No Candidates Tested			75%	46%	69%	-23

*The Annual Pass Rate changes every quarterly period. It is calculated by dividing the number of candidates who passed during the current and previous 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 (Code), section 2585(l) states:

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

This data substantiates the program’s noncompliance for nine (9) of the previous seventeen (17) consecutive quarters. Further, the program has been noncompliant with regulatory requirements for the most recent five (5) consecutive quarters (July 2015 – September 2016). Published examination statistics substantiate that no program candidates tested during eight (8) quarters from July 2012 through September 2016. **It is noted that the non-compliant pass rates started after the program’s placement on provisional approval.**

Since the inception of the program, there have been **28** graduates, **sixteen (16)** or **57.15%** have taken the licensure examination and **eleven (11)** or **68.75%** of the candidates who tested **passed**.

Based on the most recent data available (July – September 2016), the program’s average annual pass rate is **46%**. The California average annual pass rate for graduates from approved psychiatric technician programs who took the California Psychiatric Technician Licensure Examination (CAPTLE) for the first time during the same period is **69%**. The

average annual pass rate for the American College of Nursing Psychiatric Technician Program is **23** percentage points **below** the state annual average pass rate.

Faculty and Facilities

Section 2588(c) of the Psychiatric Technician Rules and Regulations states:

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

The program’s Board-approved faculty totals eleven (11) including the director. The director has a 60% teaching and 40% administrative work assignment. Of the total faculty, ten (10) are approved to teach in the clinical area.

Effective, February 8, 2016, the program was required to provide a ratio of one (1) instructor to every ten (10) students. For a maximum enrollment of 16 students, two (2) instructors are required. Therefore, the current number of clinical faculty is **adequate** for the existing enrollment.

Section 2588(b) of the Psychiatric Technician 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 2588. 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 sites are **adequate** as to number, type and variety of patients treated to enable current students to achieve the clinical objectives.

Other Considerations:

On **September 24, 2014**, the Board received correspondence from the interim school administrator advising of the **termination of the program’s director**, effective immediately. The correspondence specifically stated a new director would be in place the following day. The Board subsequently received a number of complaints regarding the program.

On October 14 and 15, 2014, Board representatives conducted an unannounced onsite inspection of the program. During the survey, eleven (11) violations were identified, including violation of Section 2584(b) of the Psychiatric Technician Rules and Regulations. Specifically, the program lacked a faculty member designated as director. At that time, 18 students were enrolled in the program.

On November 19, 2014, the Board forwarded notification to the administrator, via certified mail, regarding the lack of active program administration by an approved director. The administrator was requested to submit a report by December 5, 2014, regarding program resources and enrolled classes as follows:

- a. List of currently enrolled classes;
- b. Instructional calendar for each enrolled class;
- c. List of current faculty and assignments; and
- d. List of clinical facilities to which students were assigned.

On December 5, 2014, the Board received a response to the letter of violation from the interim administrator. The letter addressed reasons why a director **had not** been hired to date.

On December 10, 2014, the Board forwarded correspondence per certified mail to the interim school administrator advising of program violations identified during the onsite inspection by Board representatives.

On December 16, 2014, the Board approved a new program director.

On February 25, 2015, the Executive Officer **denied** the program's request for approval to admit a new class. Further, the program was required to submit a report confirming correction of the cited violations (see Attachment B).

On March 13, 2015, the director responded to the violations as required.

On **April 7, 2015**, the Board received electronic correspondence advising of the **termination of the program director**, effective April 6, 2015 at 10:00 P.M.

On April 7, 2015, the assigned consultant and Supervising Nursing Education Consultant met with the school administrator and newly appointed assistant director relative to the status of the program. Board representatives discussed the program's responses, to date, addressing previously identified violations. Of particular note, Board representatives discussed the instability in program administration since September 24, 2014, during a time when students were enrolled. Due to the lack of correction of identified violations, program representatives were advised of the program's placement on the Board's agenda for consideration of provisional approval.

On April 13, 2015, the Board approved a new program director.

On April 13, 2015, the Board received the new director's response to the violations consisting of forms, policies, attendance records, and remediation forms, each previously submitted by the former director. However, no information was provided to indicate changes in the status of the violations.

On May 15, 2015, the Board placed the program on provisional approval for two (2) years, May 15, 2015 through May 31, 2017, and required the program to comply with all requirements specified in the Psychiatric Technician Law and Psychiatric Technician Rules and Regulations. The program was required to demonstrate sustained progress in correction of the eleven (11) identified violations. Further, the program was required to admit no additional students without prior approval by the Board.

On June 4, 2015, the Board approved a new director.

On June 12, 2015, the Board forwarded a *Notice of Change in Approval Status* to the director per certified and regular mail. That *Notice* specified identified program deficiencies, required corrections, and timeline for completion (see Attachment C).

On June 29, 2015, the director provided documentation representing that all violations as specified in the *Notice* had been addressed. If the program maintained the corrective actions instituted by the director, all of the violations would have been considered corrected (see Attachment D).

On September 2, 2015, the Acting Executive Officer approved the program's request to admit 20 evening students starting November 16, 2015.

On November 17 and 18, 2015, the assigned consultant conducted an unannounced onsite inspection to evaluate the program's correction of previously identified violations and compliance with regulatory requirements. At that time, a total of five (5) previously identified violations had been corrected, three (3) of which were corrected since the current director was approved. Six (6) violations remained uncorrected.

On December 10, 2015, the director was notified through electronic and certified mail of the requirement to respond by December 15, 2015, as to why the violations previously identified in the *Notice of Change in Approval Status*, dated June 12, 2015, had been reported to the Board as corrected, and why there was a lack of current evidence confirming the corrections (see Attachment E).

On December 12, 2015, the director supplied the required report (see Attachment F). The director wrote that the program had instituted no changes since the July 2015 response, the last cohort graduated on August 10, 2015. The content of the submitted report failed to answer the required questions. As submitted, the director reported the following:

1. A new policy regarding curriculum evaluation.
 - Instructors are encouraged to give input regarding the curriculum at any time.
 - Curriculum evaluation is a permanent agenda item at faculty meeting agenda.
 - Student evaluations are taken into consideration.
 - Student pass rates are monitored and correlated with the curriculum to check for effectiveness.
 - If a new curriculum is necessary, the Director of Nursing will submit a revised curriculum for Board approval.
2. Photos of the lists of resources, for provision of counseling and tutoring services, reported to have been hung in class rooms.
3. Student remediation was not required for the last cohort of students as no students were at risk of failing. A new evaluation methodology has been created to evaluate student progress on a regular basis for future students.
 - Instructors are required to submit grading sheets to the Director after every academic evaluation.

- Instructors address students who failed a test or are near failing to identify deficiencies.
- Director reviews the grading template to identify students who are at risk of failing.
- The Director sets a remediation plan with the student regarding required actions to improve academic performance. Re-evaluation date is set.
- At re-evaluation the director reviews the student's progress and determines if the plan is effective.
 - If ineffective, the student is placed on a 30-day probation.
 - If the student achieves an average of 75% in the course, the student is removed from probation.
 - If the students fails to achieve 75%, the student is terminated from the program.

On February 5, 2016, the Board considered a report regarding the program's status and placed the program on the May 2016 meeting agenda for reconsideration of provisional approval and possible revocation.

On February 26, 2016, the Director submitted a follow-up report regarding the effectiveness of all interventions, as specified in Corrective Action #5 of the *Notice of Change in Approval Status*, dated June 12, 2015. The director submitted documentation verifying that all corrections initiated in the June 29, 2015, report remained in place. Specifically, the submitted report included the following information.

- **Admission Criteria:** Audit completed on all PT student files indicates compliance.
- **Screening and Selection:** All current students met the requirements of the screening and selection process.
- **Terminal Objectives:** The program is revising the curriculum to address issues inhibiting the student's ability to meet the terminal objectives.
- **Curriculum Objectives:** Currently, Level 1 students are meeting the curriculum objectives.
- **Instructional Plan:** The instructional plan is being followed by each faculty member. The revised instructional plan will be implemented upon Board approval.
- **Theory and Clinical Objectives:** Theory objectives have been met by each student in Level 1. Students will commence clinical instruction on **March 6, 2016**.
- **Lesson Plans:** Lesson plans are in place and available to instructors. The lesson plans will be updated and customized to the new instructional plan, upon Board approval of the revised curriculum.

- **Textbooks:** The current textbooks meet the minimal requirements of the curriculum and terminal objectives, however, new textbooks have been identified, and will be implemented upon Board approval of the new curriculum.
- **Attendance Policy:** The attendance policy is being enforced.
- **Remediation Policy:** The remediation policy is actively being used, two (2) current students presently in remediation have shown improvement and maturity.
- **Evaluation of Theory and Clinical Faculty:** The students are meeting course objectives. Theory faculty are providing effective classroom instruction, and student assessments. Currently no students are in clinical settings.
- **Evaluation of Clinical Rotations and Correlation to theory presentations:** Current students do not start clinical rotations until **March 6, 2016**.
- **Current Enrollment:** A total of six (6) evening students are currently enrolled in the program.
- The director changed her office hours to evening hours to ensure availability for students and active administration of the program during class hours (see Attachment G).

On March 1, 2016, the director submitted a revised curriculum and instructional plan for Board approval. The revised curriculum addressed the current psychiatric technician test plan, identified new textbooks, and was compliant with content requirements specified in section 2587 of the California Code of Regulations.

On April 1, 2016, the director submitted a report for the Board's consideration regarding the program's status. The following information was submitted. (See Attachment H)

- **Comprehensive Analysis of the Program:**
 - Students struggling with critical thinking and test taking skills.
 - Curriculum outdated and requires revision.
- **Identification of Program Elements Negatively Impacting Student Achievement:**
 - Curriculum in use noncompliant with regulatory requirements in that it **does not** contain content in Developmental Disabilities.
 - Textbooks were outdated.
- **Specific Action Taken to Improve Pass Rates**
 - The curriculum has been revised and is waiting for Board approval to be implemented.
 - Current textbooks meet minimum requirements. New textbooks have been identified and will be purchased after the new curriculum is approved.
 - New lesson plans were developed that correlate directly to the new instructional plan.

- **Timeline for Implementation:**
 - Is based on the approval of the new curriculum
 - The new curriculum contains the same courses and hours; however, content of courses has been improved
 - Would like to start the new curriculum with the existing students upon Board approval.

On May 13, 2016, the Board approved a major curriculum change. The new curriculum consisting of 593 theory hours, 987 clinical hours, totaling 1560 hours. Program violations were identified as being corrected excluding the violation of non-compliance of pass rates.

Status of Violations May 2016:

The following identifies the status of each of the program’s previously identified violations. At the time, all violations were considered corrected.

Section 2581(a)(4) of the Psychiatric Technician Rules and Regulations states:

“The institution shall apply to the Board for approval. Written documentation shall be prepared by the director and shall include:
 ... (4) Curriculum Objectives.”

Violation #1: Board files confirm that the program has Board – approved curriculum objectives. However, program representatives were unable to provide a copy of the approved curriculum objectives or confirm that instruction provided students is consistent with the approved objectives and results in students’ completion of the approved program of instruction.

Status #1: This violation is **corrected**.

On November 18, 2015, Board staff observed the curriculum objectives in binders located in the faculty room.

Section 2581(a) (7) of the Psychiatric Technician Rules and Regulations states:

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

Violation #2: Board files confirm that the program has a Board – approved instructional plan. However, program administration and staff were unable to produce a copy of the Board – approved instructional plan or provide evidence of its implementation.

Status #2: This violation is **corrected**.

On November 18, 2015, Board staff observed the current instructional plan in binders located in the faculty room, and on the school intranet in faculty folders.

Section 2581(a) (8) of the Psychiatric Technician 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 #3: Board files confirm that the program has an approved methodology and procedure for evaluation of the curriculum. However, the program provided no evidence that the curriculum had been evaluated to determine its effectiveness, currency, or need for revision.

Status #3: This violation is **corrected**.

Submitted minutes of faculty meetings confirmed discussion and evaluation of the curriculum. Based upon that evaluation, the need for a revised curriculum was identified. Continued evaluation of the curriculum and students' progress are now standard agenda items for each faculty meeting.

Section 2581(a)(11) of the Psychiatric Technician Rules and Regulations states:

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

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

Violation #4: Program representatives were unable to provide documentation confirming implementation of its approved methodology for the evaluation of clinical facilities.

Status #4: This violation is **corrected**.

On November 18, 2015, the assigned consultant was provided a policy and copies of evaluation forms for use specifying the director, clinical instructors, and students will complete assessments of all clinical sites. Evaluation forms included an appraisal of the appropriateness of clinical site per level of student, availability of a variety of patients and resources allowing students to complete clinical objectives, and receptiveness of facility staff to student learning. If the director follows the policy the violation will be considered corrected.

Section 2581(a) (16) of the Psychiatric Technician Rules and Regulation states:

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

... (16) Resources for provision of counseling and tutoring services for students.”

Violation #5: The program failed to provide evidence confirming resources for the provision of counseling and tutoring services either posted on campus or in the student handbook.

Status #5: This violation is **corrected**.

On January 20, 2016, the director submitted a revised student handbook. The last page of the handbook includes available counseling and tutoring services for students.

Section 2582(b) of the Psychiatric Technician Rules and Regulations states:

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

Violation #6: According to the interim administrator, since September 2014, several instructors were terminated or resigned. The program failed to notify the Board of such terminations within the time prescribed by regulations. Further, the program was unable to provide a list of current Board - approved faculty.

Status #6: This violation is **corrected**.

On November 18, 2015, during the onsite inspection, documentation and faculty files provided by the program matched the Board's list of current faculty members for the program. The director has continued to notify the Board of the termination or resignation of staff within ten (10) days of departure from the program.

On June 23, 2016 the director submitted documentation of all active faculty members on the faculty and facility list. The submitted list did not match Board documents of current faculty members. The faculty list provided was missing six (6) faculty members names, three (3) who had been Board approved between June 2015 and August 2016. On September 2, 2016, the director submitted a notice to remove three the instructors from the approved list. The Board and program faculty lists are now reconciled, however, this is the third time this violation has occurred.

Section 2585(e) of the Psychiatric Technician Rules and Regulation states:

“Each instructor shall have a daily lesson plan which correlates the theory and practice offered to the student. A copy of this plan shall be available to the director.”

Violation #7: The program was unable to provide lesson plans as required by regulation. Program staff and the interim administrator provided binders of purchased content and course descriptions. No lesson plans correlating theory and practice were provided.

Status #7: This violation is **corrected**.

On March 18, 2016, the director submitted daily lesson plans specific to the instructional plan. The lesson plans detail the specific daily content with methods of teaching and classroom evaluation. (See Attachment I)

Section 2585(i) of the Psychiatric Technicians Rules and Regulations states:

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

Violation #8: While the program has an approved remediation plan, during the October 2014 inspection, the program was unable to provide evidence confirming its implementation in student files.

Status #8: This violation is **corrected**.

On February 26, 2016, the director submitted documentation that evidenced remediation of two (2) current students. The total enrollment in the program is six (6) students.

Section 2585(h) of the Psychiatric Technician 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. . .”

Violation #9: The program has an attendance policy published in the student handbook. However, the interim administrator confirmed that accurate attendance records have not been kept for students in the psychiatric technician program and stated a new plan has been developed. An analysis of program documents during and since the onsite inspection produced no evidence of follow-up for student absences from clinical or theory hours.

Status #9: The violation is **corrected**

On November 18, 2015, an analysis of provided school records confirmed that the attendance policy is being followed. Documentation provided evidence that clinical and theory hours were made up timely and clinical make-up topics correlated to theory.

Section 2588(d) of the Psychiatric Technician 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 #10: As noted in Violation #4, program representatives were unable to provide documentation substantiating the evaluation of clinical facilities.

Status #10: This violation is **corrected**.

On November 18, 2015, the program provided copies of evaluation forms to the assigned consultant. The forms specified the director, clinical instructors, and students had completed assessments of all clinical sites. Evaluation forms included an appraisal of the appropriateness of clinical sites per level of student, availability of a variety of patients and resources allowing students to complete clinical objectives, and receptiveness of facility staff to student learning.

Section 2584(b) of the Psychiatric Technician Rules and Regulations states:

“Each psychiatric technician program shall have one faculty member, designated as director who meets the requirement of subsection (c)(1) herein who shall actively administer the program. The director is responsible for compliance with all regulations in Chapter 2, Article 5 (commencing with Section 2580 et seq.).”

Violation #11: On September 24, 2014, the Board was notified of the termination of the program director. The program had no Board – approved director actively administering the program from that time through December 16, 2014, when a new director was approved. The newly approved director was terminated on April 6, 2015.

On April 7, 2015 the Assistant Director and Administrator met with the Supervising Nursing Education Consultant and the assigned Nursing Education Consultant. The Assistant Director introduced herself as the “Dean of Nursing.” Neither of the program representatives could identify the number of current students in the program.

On April 13, 2015, the Assistant Director was approved by the Board as Director of the Psychiatric Technician Program.

Observations during the onsite program inspection, evaluation of critical elements, and documents and information submitted subsequent to the onsite inspection confirm the lack of active program administration by a Board – approved director.

Status #11: This violation is **corrected**.

The current director, approved June 4, 2015, has provided documentation evidencing the correction of regulatory issues with the program. All identified violations have been corrected. Additionally, the director has arranged her office hours to the afternoon and evening to accommodate the evening students' schedule. The director's availability to the current evening students enhances her ability to actively administer the program.

On May 13, 2016 the Board approved a major curriculum change. The new curriculum consisting of 593 theory hours, 987 clinical hours, totaling 1560 hours. Program violations were identified as being corrected excluding the violation of non-compliance of pass rates.

On September 2, 2016, during the analysis of program documents submitted in support of a request to admit students, a **reoccurring violation** of the Psychiatric Technician Rules and Regulation was identified.

Section 2582(b) of the Psychiatric Technician Rules and Regulations states:

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

Violation #1: This is a reoccurring violation that had appeared to have been corrected on November 18, 2015. On September 2, 2016, during the initial examination of submitted documents, dated June 23, 2016, for a request to admit students, discrepancies were identified in the reported faculty and Board records. A comparison analysis of the two (2) documents confirmed that five (5) Board - approved faculty were not on the list of current faculty provided by the director. Upon request for correction, the director submitted a termination notice for three (3) of the five (5) faculty and identified two (2) had not been added to their faculty list upon Board approval.

Status Violation #1: The violation is **not corrected**.

The director submitted documentation, and faculty applications to correct the violation. However, with the reoccurrence of the violation a pattern of compliance must be obtained to correct this violation.

Unannounced Program Inspection:

On September 15, 2016, Board staff conducted an unannounced program inspection. **Five (5) additional reoccurring violations were identified.**

Campus:

The physical campus and resources including class rooms, skills lab, and faculty space for class preparation are unchanged from the previous inspections. The instructional plan and lesson plans were identified in binders and on the program intra-net. Outside resources for tutoring and counseling remain available to students. Program policy and procedure manuals were evaluated including faculty meeting minutes, clinical site evaluations, attendance records, and grading.

Interview of faculty and students:

No staff or students were available for interview. The students were assigned to an evening clinical experience with the clinical site 90 minutes from the campus.

Student Files and Records:

Evidence of previously identified violations in the admission and screening policy had been corrected. The previously missing documents indicating completion of high school or the equivalent for the enrolled population are now in all current student files. Evidence that remediation for both academic and attendance deficiencies issued were initiated, a date for completion or reevaluation was supplied. No evidence that the reevaluation, completion of assignments, or attendance make-up was identified.

The following violations were identified during the onsite inspection.

Section 2585(i) of the Psychiatric Technicians Rules and Regulations states:

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

Violation #2: Evaluation of student files identified remediation documentation forms which provided a date for reevaluations. However, evidence that the remediation was completed or follow-up of student progress was not identified. One remediation form stated that a student was required to retake a failed examination. No evidence that the examination was retaken was identified, and the student remains in the program. An additional student's records identified that the student failed the communication class, and has three (3) absences that have not been made up. Per documentation identified in the student file and verbal communication with program director and staff, the student remains in the program at the insistence of the student's mother.

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

Section 2585(h) of the Psychiatric Technician 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. . ."

Violation #3: The program has an attendance policy published in the student handbook. However, absences for clinical and theory were identified for two (2) of the six (6) current students. No evidence of make-up was identified.

Status #3: This violation is **not corrected**.

Section 2588(d) of the Psychiatric Technician 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 #4: Program representatives were unable to provide documentation confirming implementation of its approved methodology for the evaluation of clinical facilities. Forms provided in the facility evaluation binder included student clinical performance evaluations. Forms previously provided by the director as proof of correction of the violation were not provided. According to the director and staff, the forms had not been implemented.

Status #4: This violation is **not corrected**.

Section 2584(b) of the Psychiatric Technician Rules and Regulations states:

"Each psychiatric technician program shall have one faculty member, designated as director who meets the requirement of subsection (c)(1) herein who shall actively administer the program. The director is responsible for compliance with all regulations in Chapter 2, Article 5 (commencing with Section 2580 et seq.)."

Violation #5: Based on observations of the Board representative, evaluation of critical elements, and identification of reoccurring violations confirm the program lacks active administration by a program director.

Status #5: This violation is **not corrected**.

Section 2585(l) of the Psychiatric Technicians Rules and Regulations states:

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

Violation #6: Since placement on provisional approval, the program's average annual pass rate has declined **from 22 percentage points above the state average annual pass rate for Quarter 1 - 2015 to 23 percentage points below the state average annual pass rate for Quarter 3 - 2016.**

Status #6: This violation is **not corrected**.

Summary:

Since September, 24, 2014, the program has terminated three (3) directors. The current Board approved director has remained in place since June 12, 2015. An unannounced onsite program inspection was completed on October 14, and 15, 2014, where eleven (11) violations were identified. On May 15, 2015, the Board placed the program on provisional approval for a two (2) year period due to the number and severity of violations.

On November 17 and 18, 2015, the assigned consultant conducted an unannounced onsite inspection to evaluate the program's correction of previously identified violations and compliance with regulatory requirements. A total of five (5) previously identified violations had been corrected, three (3) of which were corrected since the current director was approved. Six (6) violations remained uncorrected.

On May 13, 2016, the Board extended the program's provisional approval for a one-year period through May 31, 2017. Additionally, a major curriculum revision was approved. At that time, all violations excluding the program pass rate were considered corrected.

On September 2, 2016, during an analysis of submitted documents requesting approval to admit a new class, **one (1) of the previously corrected violations was identified.**

Subsequently, an additional unannounced inspection was conducted on September 15, 2016. **Five (5) additional reoccurring violations** were identified, for a total of **six (6) current violations.**

On September 30, 2016, the Board sent a Notice of Violations via Certified Mail to the program director. (See Attachment J)

Published examination statistics substantiate the program's **noncompliance** for nine (9) of the previous seventeen (17) consecutive quarters. Further, the program has been noncompliant with regulatory requirements **for the most recent six (6) consecutive quarters July 2015 – September 2016).** Additionally, of the seventeen (17) quarters, eight (8) quarters no program candidates took the CAPTLE Licensure examination.

Since placement on provisional approval, the program's licensure pass rates have declined from 22 percentage points above the state average annual pass rate for first - time program graduates, to 23 percentage points below the state average of first - time program graduates. The program has been noncompliant for the last five (5) consecutive quarters from July 2015 through September 2016.

Recommendations:

1. Revoke American College of Nursing Psychiatric Technician Program's provisional approval, effective January 30, 2017.
2. Remove the program from the Board's *List of Approved Vocational Nursing Programs*, effective January 30, 2017.

Rationale: From September 23, 2014 through June 4 2015, the American College of Nursing Psychiatric Technician Program lacked consistent and active administration by a Board - approved director during a time when students were enrolled. That failure was evidenced by the following:

- a. Termination of the program director on September 23, 2014;
- b. Program failure to hire a new director approved by the Board until December 16, 2014;
- c. Termination of the new director effective April 13, 2015; and
- d. Program appointment and Board - approval of a new director on April 13, 2015.
- e. Program appointment and Board – approval of a new director on June 4, 2015.

On May 15, 2015, the Board placed the program on provisional approval through May 31, 2017, due to noncompliance with regulatory requirements. Specifically, the Board considered the program's persistent instability in program administration and its failure to correct 11 identified violations of the California Code of Regulations. The Board required the program to obtain Board approval prior to the admission of additional classes.

On June 29, 2015, the Board received documentation from the new director reporting that all of the identified violations had been addressed and that adherence to the submitted policies should correct identified violations.

Subsequently, on November 17 and 18, 2015, the Board conducted an unannounced onsite inspection of the program. Six (6) of the previous violations were identified as uncorrected. Five (5) violations were corrected. On February 26, 2016, the program submitted documentation that, if implemented as presented, would correct all violations.

On May 13, 2016, the Board approved a major curriculum change directed at enhancing students' learning experiences in the program. Further, the Board extended the program's provisional approval and scheduled reconsideration for the May 2017 Board Meeting.

On September 3, 2016, the director submitted a request to admit students. Based on submitted documents, one (1) reoccurring violation was identified. On September 15, 2016, an unannounced program inspection was completed. Five (5) additional violations were identified.

The director has failed to demonstrate active administration of the program as evidenced by the reoccurrence of six (6) violations.

Currently, the program's average annual pass rate is **46%**, which is **23 percentage points below** the state average annual pass rate. Since the inception of the program, there have been **28 graduates, sixteen (16) or 57%** have taken the licensure examination and **eleven (11) or 69%** of the candidates who tested **passed**.

Currently the program has six (6) students scheduled to graduate in January 2017. Due to the reoccurrence of six (6) violation, and the five (5) consecutive quarters (July 2015 – September 2016) of noncompliant pass rates, it is prudent to revoke American College of Nursing, Psychiatric Technician Program.

If the recommendation is adopted, no students will be impacted. Based on submitted enrollment statistics, the currently enrolled class is scheduled to graduate effective January 31, 2017.

- Attachment A: History of Prior Board Actions
- Attachment B: Consideration of Unannounced Visit and Request to Admit
- Attachment C: Notice of Change of Approval Status
- Attachment D: Correspondence from Program Dated June 29, 2015
- Attachment E: Board Decision Regarding Reoccurrence of Previous Violations Dated December 10, 2015
- Attachment F: Correspondence from Program Dated December 12, 2015
- Attachment G: Correspondence from Program Dated February 26, 2016.
- Attachment H: Correspondence from Director Dated March 29, 2016
- Attachment I: Sample Lesson Plan Received March 18, 2016

Agenda Item #17.B.1., Attachment A

AMERICAN COLLEGE OF NURSING PSYCHIATRIC TECHNICIAN PROGRAM

History of Prior Board Actions

- On February 4, 2009, the Board approved the school's request to begin a 12-month psychiatric technician program with an initial class of 30 students to commence on March 15, 2009 and to graduate on March 20, 2010. The Board also approved the curriculum for 1560 hours, including 601 theory and 959 clinical hours.
- On May 5, 2010, the program notified the Board that first class would begin on September 22, 2010 and completing on October 21, 2012.
- On March 20, 2012, the Executive Officer approved full approval for the American College of Nursing Psychiatric Technician Program for the four-year period from November 1, 2011, through October 31, 2015, and the Board issued a certificate accordingly; approved the program's request to admit 30 students on April 23, 2012, with a projected graduation date of April 27, 2013, only, to **replace** students who graduated on November 9, 2011; and, required the program to obtain Board approval prior to the admission of each class.
- On December 6, 2012, the executive officer approved the program's request to admit a day class of 30 students and 3 alternates on January 28, 2013, **only**, with a graduation date of February 8, 2014, to **replace** students graduating on January 24, 2013; and, continue to require the program to obtain Board approval prior to the admission of each class.
- On January 22, 2013, the Executive Officer approved the program's request to admit an additional class of 30 students with three alternates on May 13, 2013, only, with a projected graduation date of May 16, 2014; **and**, required the program to obtain Board approval prior to the admission of each class; **and**, required the director to submit a report by June 1, 2013, including, but not limited to, the following issues:
 - a. Actions being taken by the program to assure that graduates take the licensure examination in a timely manner, including mechanisms for following up with graduates of prior classes who have not yet taken the licensure examination.
 - b. Assessment of admission criteria to determine if they adequately screen candidates for the program in order to decrease attrition from the program.
- On November 25, 2013, The Executive Officer approved the program's request to admit an additional class of 30 students with three alternates on December 2, 2013, **only**, with a projected graduation date of January 15, 2015; **and**, required the program to obtain Board approval prior to the admission of each class.

- On May 22, 2014 the Executive Officer **approved** the program's request to admit an additional class of 30 students with three alternates on June 9, 2014, **only**, with a projected graduation date of June 26, 2015; **and required** the program to obtain Board approval prior to the admission of each class; **and, required** the director to conduct a complete analysis of the action plan submitted June 14, 2013 regarding the program's attrition rate and graduates not testing for licensure after completion of the program and submit a written report by June 30, 2014. That report must include a complete analysis the program, factors contributing to the program's attrition rate, plan to reduce the attrition rate, timeline for implementation, effect of employed interventions.
- On September 24, 2014, the Board received correspondence regarding the termination of the program effective immediately.
- On October 14 and 15, 2014, Board representatives conducted an onsite inspection of the program. Eleven (11) violations were identified.
- On November 19, 2014, the program was notified of violation of no administration of the program.
- On December 10, 2014, the program was notified of the eleven (11) violations identified during the unannounced program visit.
- **On December 16, 2014, the Board approved a new director.**
- On January 15, 2015, the Board received program corresponding regarding its response to identified violations.
- On February 25, 2015, the Executive Officer **denied** the program's request to admit a class of 20 students on March 9, 2015, **only**, with a projected graduation date of July 5, 2016. **Continued** to require the program to obtain Board approval prior to the admission of each class. **Required** the program to correct deficiencies identified during the onsite visit and submit documentation confirming correction no later than **March 15, 2015**, to include the following:
 - a. Implementation of the program's approved methodology including timeline for initial and ongoing evaluation of the curriculum.
 - b. Names of program faculty terminated since September 1, 2014, including dates of approval, utilization, and dates of termination.
 - c. Plan to ensure maintenance of accurate faculty data and Board notification of faculty terminations as prescribed by Section 2527 (b) of the Psychiatric Technician Rules and Regulations.
 - d. Lesson plans for the approved curriculum
 - e. Implementation of the program's attendance policy to include identification of students for whom absences are identified and assigned follow-up.
 - 1) Implementation of the program's approved methodology including timeline for initial and ongoing evaluation of clinical facilities utilized for student clinical experiences.

- 2) Implementation of program's remediation policy to include identification of students who are at risk of failure from either academic or code of conduct issues, identification of deficiencies, remediation plan, **and** follow-up.

Failure to correct identified violations may result in the program being placed on the May 2015 Board meeting agenda, for consideration of placement on provisional approval.

- **On April 13, 2015, the Board approved a new program director.**
- On May 15, 2015, the full Board placed the American College of Nursing Psychiatric Technician Program on provisional approval for the two (2) year period from May 15, 2015 through May 31, 2017; **and** required the program to admit no additional students without prior approval by the full Board; **and** required the program director to submit, under penalty of perjury, the names of all enrolled students, date of admission, placement in the curriculum, and expected date of graduation by **June 1, 2015; and** required the program to correct existing violations identified during the onsite inspection, and submit a report identifying implemented interventions no later than **June 30, 2015**. The report shall include the following.
 - a. Implementation of the approved methodology, including timeline for initial and ongoing evaluation of the curriculum
 - b. Implementation of the approved methodology for evaluation of the clinical facilities.
 - c. Plan to ensure maintenance of accurate faculty data and Board notification of faculty terminations as prescribed by Section 2582 (b) of the Psychiatric Technician Rules and Regulations.
 - d. Evaluation of student performance to determine the need for remediation or removal from the program.
 - e. Implementation of the approved attendance policy to include identification of students for whom absences are identified and assigned follow-up.
 - f. Implementation of the program's approved methodology including timeline for initial and ongoing evaluation of clinical facilities utilized for student clinical experiences.
 - g. Implementation of program's remediation policy to include identification of students who are at risk of failure from either academic or code of conduct issues, identification of deficiencies, remediation plan, **and** follow-up.
 - h. Active administration by a Board - approved director.

And required the program to submit a follow-up report regarding the effectiveness of all implemented interventions no later than **August 30, 2015; and** required the program to submit follow-up reports in ten (10) months, but no later than **March 1, 2016**, and 22 months, but no later than **March 1, 2017**. The reports shall 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.

And required the program to comply with all approval standards in Article 4 of the Psychiatric Technician Law, commencing at Business and Professions Code Section 4530, and Article 5 of the Psychiatric Technician Rules and Regulations, commencing at California Code of Regulations, Title 16, section 2580; **and** required the program to demonstrate correction and sustain corrections in relation to the violations. **Failure** to make any of these corrective actions may cause the full Board to revoke the program's approval. Placed the program on the **May 2017** Board agenda for reconsideration of provisional approval.

- **On June 4, 2015, the Board approved a new director.**
- On June 12, 2015, the program was provided with the *Notice of Change in Program Status*, specifying identified program deficiencies, required corrections, and timeline for completion.
- On September 2, 2015 the Acting Executive Officer denied American College of Nursing Psychiatric Technician Program's request for approval to admit an evening class of 30 students starting November 16, 2015, with a projected graduation date of November 23, 2016, **only, to replace** the evening class that graduated on August 10, 2015; **and** approved the program's admission of an evening class of 20 students starting November 16, 2015, with a projected graduation date of November 23, 2016, **only, to replace** the evening class that graduated on August 10, 2015; **and**, continued to require the program to admit no additional students without prior approval by the Board.
- On December 8, 2015, the Acting Executive Officer required the program to submit a detailed written explanation regarding the lack of correction of violations identified in October 2014, no later than **December 15, 2015**. The explanation shall include the following:
 - a. Required corrections of identified violations as specified in the *Notice of Change in Approval Status* dated June 12, 2015;
 - b. Program's reported correction of all violations in June 2015;

- c. Lack of evidence confirming correction in November 2015.
- On December 17, 2015, the Board received correspondence from the director accompanied by the required report.
- On February 5, 2016, the Board rendered the following decisions:
 1. Continue provisional approval of the American College of Nursing Psychiatric Technician Program through **May 31, 2017**; and,
 2. Placed the program on the **May 2016**, Board agenda for reconsideration of provisional approval and possible revocation.
 3. Require the program to obtain approval by the full Board prior to the admission of additional classes.
 4. Require the program to maintain a 1:10 instructor to student ratio in all clinical activities.
 5. Require the program director to submit, under penalty of perjury, the names of all enrolled students, date of admission, placement in the curriculum, and expected date of graduation within 15 days of the class start.
 6. Require the program to correct all violations identified during the onsite inspections, and submit a report identifying implemented interventions and timelines no later than **April 1, 2016**. The report shall include the following.
 - a. Development and implementation of a plan to evaluate curriculum.
 - b. Development and implementation of a permanent plan to notify students of available counseling in the area.
 - c. Development and implementation of the program lesson plans.
 - d. Evaluation of student performance to determine the need for remediation or removal from the program.
 - e. Implementation of the approved remediation policy to include identification of students who are at risk of failure from either academic or code of conduct issues, identification of deficiencies, remediation plan, **and** follow-up.
 7. Require the Director to submit a report to the Board no later than **April 1, 2016**. The report must include:
 - a. A comprehensive analysis of the program.
 - b. Identification of program elements negatively impacting student achievement.
 - c. Specific actions taken to improve program pass rates,
 - d. Timeline for implementation, and the effect of employed interventions.
 8. Failure to take these corrective actions may cause the full Board to revoke the program's approval.
- On May 13, 2016, the Board Continue provisional approval of the American College of Nursing Psychiatric Technician Program through May 31, 2017; **and**.
 1. Placed the program on the **May 2017** Board agenda for reconsideration of provisional approval.
 2. Approved the program's request for a major curriculum revision, to include 1560 total hours [Theory – 593; Clinical – 967].

3. Continued the program's requirement to obtain approval by the Board prior to the admission of additional classes.
4. Required the program to maintain a 1:10 instructor-to-student ratio in all clinical activities.
5. Required the program director to submit, under penalty of perjury, the names of all enrolled students, date of admission, placement in the curriculum, and expected date of graduation within 15 days of the class start.
6. Failure to take these corrective actions may cause the full Board to revoke the program's approval.

Agenda Item #19.B.1., Attachment B



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 26, 2015

Brenda Beal-Boyer
Director, Psychiatric Technician Program
American College of Nursing
1855 Gateway Boulevard
Tower II, Suite 180
Concord, CA 94520

Subject: Consideration of Unannounced Site Visit and Request to Admit Students.

Dear Ms. Beal-Boyer,

February 25, 2015, the Board of Vocational Nursing and Psychiatric Technicians (Board) considered the consultant's report relative to the ***American College of Nursing- Psychiatric Technician Program – Consideration of Unannounced site visit and Request to Admit Students.***

The following decisions were rendered:

1. Deny the program's request to admit a class of 20 students on March 9, 2015, only, with a projected graduation date of July 5, 2016.
2. Continue to require the program to obtain Board approval prior to the admission of each class.
3. Require the program to correct deficiencies identified during the onsite visit and submit documentation confirming correction no later than **March 15, 2015**, to include the following:
 - a. Implementation of the program's approved methodology including timeline for initial and ongoing evaluation of the curriculum.
 - b. Names of program faculty terminated since September 1, 2014, including dates of approval, utilization, and dates of termination.
 - c. Plan to ensure maintenance of accurate faculty data and Board notification of faculty terminations as prescribed by Section 2527 (b) of the Vocational Nursing Rules and Regulations.
 - d. Lesson plans for the approved curriculum.
 - e. Implementation of the program's attendance policy to include identification of students for whom absences are identified and assigned follow-up.
 - f. Implementation of the program's approved methodology including timeline for initial and ongoing evaluation of clinical facilities utilized for student clinical experiences.

Consideration of Unannounced Site Visit and Request to Admit

February 26, 2015

Page 2 of 2

- g. Implementation of program's remediation policy to include identification of students who are at risk of failure from either academic or code of conduct issues, identification of deficiencies, remediation plan, and follow-up.
4. Failure to correct identified violations may result in the program being placed on the May, Full Board meeting agenda, for consideration of Provisional Approval.

Rationale: On September 24, 2014, the interim director notified the Board of the immediate termination of the program director of the Psychiatric Technician program. The Board additionally, received student complaints regarding inadequate number of faculty and clinical sites, resulting in last minute cancelation of classes. Board representatives conducted an unannounced site survey on October 14 and 15, 2014. Eleven (11) violations of Article 5 of the Psychiatric Technician Rules and Regulations were identified. A new Program Director was approved on December, 16, 2014. To date, four (4) of the eleven violations have been corrected; seven (7) violations remain uncorrected.

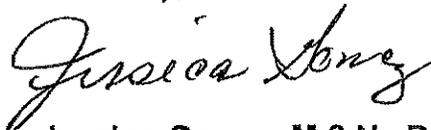
American College of Nursing Psychiatric Technician Program's annual average pass rate is 100%. The program has consistently had compliant pass rates for the last five (5) quarters, averaging 14 to 18 percentage points **above** State average annual pass rates. However, the number of program graduates tested is very small. A total of ten (10) students have graduated for the program since inception in September 2010. Of the ten (10) students, seven (7) have tested; six (6) passed the licensing examination on the first attempt, one (1) failed, and three (3) have not tested.

Currently, the program has six students who are scheduled to graduate in June 2015. Denying the class will allow the new director time to familiarize herself and analyze the program, develop an action plan with a timeline, and implement corrections for the seven (7) remaining violations.

Board staff will continue to monitor the program by tracking its licensure examination pass rate quarterly and analyzing the program's resources and progress in correcting current violations.

Please contact the Board should further clarification be needed.

Sincerely,



Jessica Gomez, M.S.N., R.N.
Nursing Education Consultant

Agenda Item #19.B.1., 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
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CERTIFIED MAIL

June 12, 2015

Felicidad Silva, B.S., R.N.
Director, Psychiatric Technician Program
American College of Nursing
1855 Gateway Blvd., Tower 2 Ste. 180
Concord, CA 94520

Subject: Notice of Change in Approval Status

Dear Ms. Silva:

Pursuant to the action of the Board of Vocational Nursing and Psychiatric Technicians (Board) on May 15, 2015, the American College of Nursing Psychiatric Technician Program has been placed on provisional approval for the two – year period from May 15, 2015 through May 31, 2017.

The purpose of this letter is to explain the areas of non-compliance identified 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 26, 2015**.

AREAS OF NON-COMPLIANCE (VIOLATION(S))

In accordance with Section 2581.1(c) of title 16 of the California Code of 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 2581..."

Section 2581(a)(8) of title 16 of the California Code of 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 2581(a)(11) of title 16 of the California Code of 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 2582(b) of title 16 of the California Code of Regulations states:

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

Section 2585(h) of title 16 of the California Code of 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 . . ."

Section 2585(i) of title 16 of the California Code of Regulations states:

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

Section 2588(d) of title 16 of the California Code of 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."

Section 2584(b) of title 16 of the California Code of Regulations states:

"Each psychiatric technician 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 in Chapter 2. Article 5 (commencing with Section 2580 et seq.)."

REQUIRED CORRECTION(S)

1. The American College of Nursing Psychiatric Technician Program shall submit, under penalty of perjury, the names of all enrolled students, date of admission, placement in the curriculum, and expected date of graduation by **June 30, 2015**.
2. The program shall admit **no** additional students without prior approval by the Board.
3. The program shall correct existing violations identified during the onsite inspection, and submit a report providing evidence of implemented interventions, to include the following no later than **June 30, 2015**.
 - a. Implementation of the approved methodology, including timeline for initial and ongoing evaluation of the curriculum
 - b. Implementation of the approved methodology for evaluation of the clinical facilities.

- c. Plan to ensure maintenance of accurate faculty data and Board notification of faculty terminations as prescribed by Section 2582 (b) of the Psychiatric Technician Rules and Regulations.
 - d. Evaluation of student performance to determine the need for remediation or removal from the program.
 - e. Implementation of the approved attendance policy to include identification of students for whom absences are identified and assigned follow-up.
 - f. Implementation of the program's approved methodology including timeline for initial and ongoing evaluation of clinical facilities utilized for student clinical experiences.
 - g. Implementation of program's remediation policy to include identification of students who are at risk of failure from either academic or code of conduct issues, identification of deficiencies, remediation plan, **and** follow-up.
 - h. Active administration by a Board - approved director.
4. The program shall submit a follow-up report regarding the effectiveness of all implemented interventions no later than **August 30, 2015**.
5. The program shall submit follow-up reports in ten (10) months, but no later than **March 1, 2016**, and 22 months, but no later than **March 1, 2017**. The reports shall 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.
6. The program shall comply with all approval standards in Article 4 of the Psychiatric Technician Law, commencing at Business and Professions Code Section 4530, and Article 5 of the Psychiatric Technician Rules and Regulations, commencing at California Code of Regulations, Title 16, section 2580.

7. The program shall demonstrate correction and sustain corrections in relation to the violations.
8. Failure to make any of these corrective actions may cause the full Board to revoke the program's approval.

FUTURE BOARD ACTION

Your program will be placed on the **May 2017** 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 pages 2 through 4, you must submit this documentation by the fifteenth day of the second month prior to the Board meeting.

OTHER IMPORTANT INFORMATION

Please be advised that, pursuant to the Board's regulations, the program will not be authorized to admit new classes beyond the established pattern of admissions previously approved by the Board. The established pattern of admissions approved by the Board is as follows: **Prior approval by the 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 2582 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 2581.1, 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,



JOHN BROOKS

Acting Executive Officer

Enclosures

cc: Board Members

JB: jg



TITLE 16 CALIFORNIA CODE OF REGULATIONS

2581.1. Provisional Approval.

- (a) Provisional approval means a program has not met all requirements as set forth in this chapter and in Chapter 10, 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 2581. 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 psychiatric technician 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 psychiatric technician program for a minimum period of one calendar year.



Acknowledgement of Change in Approval Status

I, Felicidad Silva, director of American College of Nursing Psychiatric Technician
(Director's Name) (Name of Program)

Technician Program hereby acknowledge that this program's status has been changed to provisional approval for the two – year period from May 15, 2015, through May 31, 2017. 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 **June 26, 2015**.

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

(Signature of Director)

(Date)

**Please complete this form and fax to the Board at
(916) 263-7866 by Friday, June 26, 2015.**



Agenda Item #19.B.1., Attachment D

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June 29, 2015

Ms Cheryl C. Anderson, MSN, RN
Supervising Nurse Education Consultant

Ms Jessica Gomez
Nurse Education Consultant

Dear Ms Anderson and Ms Gomez,

The American College of Nursing would like to express our gratitude to our Nurse Education Consultant, Ms Jessica Gomez for her patience, support, and guidance during this process. Likewise, to the supervising Nurse Education Consultant, Ms Cheryl Anderson for her dedication and commitment in ensuring the safety of the general public.

This letter is in response to our PT Program violations:

Section 2581(a)(8) of the Psychiatric Technician 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 #3: Board files confirm that the program has an approved methodology and procedure for evaluation of the curriculum. However, the program provided no evidence that the curriculum had been evaluated to determine its effectiveness, currency, or need for revision.

Status #3: This violation is **not corrected**. The director provided evidence of staff meeting minutes stating the evaluation of the program curriculum was discussed. On April 13, 2015, for the ten (10) faculty members, the new director submitted six (6) curriculum evaluation forms dated April 10, 2015, each to represent a different instructor's evaluation. The information provided reflected the opinions and contained signatures of two faculty members only. The forms had large areas redacted.

To date, the program failed to submit findings from the evaluation of the curriculum, including, but not limited to, its effectiveness, correlation of theory and clinical content, revisions, etc. Further, a timeline and plan for future evaluations was not submitted.



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ACN response: The students completed a Student Curriculum Evaluation form. (See Exhibit PT-V#3a: PTE D614 Curriculum Evaluation)
ACN held a faculty meeting on Thursday, June 11. The curriculum evaluation is part of the discussion. The curriculum discussion will be an ongoing part of the faculty meeting agenda every month. (See Exhibit PT-V#3b: Faculty meeting minutes section V. pertaining to the curriculum discussion)

Section 2581(a)(11) of the Psychiatric Technician Rules and Regulations states:

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

Violation #4: Program representatives were unable to provide documentation confirming implementation of its approved methodology for the evaluation of clinical facilities.

Status #4: This violation is **not corrected**. The program has a Board approved methodology for evaluation of clinical sites. The director has submitted a plan for implementation of the approved evaluation methodology. According to the draft supplied by the director the evaluation form was introduced at the January 2015 faculty meeting, student evaluation forms were introduced to students on Feb 9, 2015. However, to date, the program has failed to submit a timeline of implementation, or evidence that any clinical sites have been evaluated by the director, or faculty members.

ACN response: Evaluation of clinical facility conducted by our faculty and students for appropriateness and ability to meet the clinical objectives. (See Exhibit PT-V#4a: PT student clinical site eval, Exhibit PT-V#4b: PT faculty clinical site eval). This is conducted in the afternoon of the last clinical day of the rotation. The student clinical evaluation by the instructor will also be conducted at the same time. Note that the students and instructors are not to wait until the last day of the rotation to make an evaluation if the facility no longer meets the clinical objectives of the rotation.



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Section 2582(b) of the Psychiatric Technician Rules and Regulations states:

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

Violation #6: According to the interim administrator, since September 2014, several instructors were terminated or have resigned. The program failed to notify the Board of such terminations within the time prescribed by regulations. Further, the Program was unable to provide a list of current Board approved faculty.

Status #6: This violation is **not corrected**. The program has submitted a list of current faculty and their utilization. The director submitted a plan to evaluate faculty status **monthly** and notify the Board of any changes. As presented, the plan is noncompliant with the regulatory requirement to notify the Board within 10 days of the termination or resignation of a faculty member.

On April 7, 2015, the administrator verbally informed the Board of the termination of the psychiatric technician program director on April 6, 2015. The terminated director submitted a notice of her resignation to the Board on April 13, 2015.

On April 13, 2015, the newly approved director submitted a plan specifying that each employee will submit in writing their intentions to continue teaching at the American College of Nursing **weekly**. To date, the director has failed to indicate how the information and forms would be handled or when the Board would be notified of terminations or resignations.

It is important to note that reported weekly notification of faculty intentions to continue teaching **does not** support the development of a consistent schedule for instruction and may negatively impact the delivery of quality education for enrolled students

ACN response: The Program Director updated the current faculty roster based on current faculty assignment. Any instructor not actively teaching was removed from the active list and reported to the board as terminated as of the date of investigation. If at any time the removed faculty wishes to teach again, a new faculty approval application will be submitted to the board. Moving forward, any faculty termination or resignation will be reported to the board on the same day of determination or within 10 days at most. (See



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exhibit PT-V#6a: List of BVNPT approved PT faculty. See exhibit PT-V#6b: Email to NEC of PT faculty termination notification.)

Section 2585(i) of the Psychiatric Technicians Rules and Regulations states:

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

Violation #8: While the program has an approved remediation plan, during the survey visit, the program was unable to provide evidence confirming its implementation by student files or by the interim administrator.

Status #8: This violation is **not corrected**. On April 13, 2015, the new director submitted one remediation form dated March 28, 2015. The reason for remediation was identified as "*clinical absence due to instructor absence*." The student's assigned remediation consisted of completing a case study. The instructor signed the remediation form on April 4, 2015. The form was not signed by the student. (See Attachment F)

To date, the program has failed to submit documentation confirming the evaluation of the document submitted by the student and reevaluation of the student by the instructor to ensure that objectives missed as a result of the absence were met in accordance with an established schedule.

ACN response: The new PD is actively involved in the student's progress. A review of all current students' progress is reviewed. Student services are to report any student nearing the 10% allowable in absences. The PD will meet with the students nearing the 10% allowable and give advisement. The PD will meet with students who exceed the 10% allowable and place them on Attendance probation with a mutually agreed upon action plan. (See Exhibit PT-V#8a: Memo on absences and make up work, PT makeup work and PT probation). The faculty will submit grades to the PD for early identification of students are risk and appropriate follow up actions implemented. Students who are at academic risk for failure will be advised by the PD to determine the need for: additional academic support, need to be placed on probation, or the removal from the program. (See PT-V#8b: Memo on weekly grade submission)



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Section 2585(h) of the Psychiatric Technician 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 times is required. . ."

Violation #9: The program has an attendance policy published in the student handbook. However, the interim administrator confirmed that accurate attendance records have not been kept for students in the psychiatric technician program and stated a new plan has been developed. An examination of program documents during and since the onsite inspection produced no evidence of follow-up for student absences from clinical or theory hours.

Status #9: The violation is **not corrected**. On December 13, 2014, the director submitted to the Board a revised attendance policy. The Director resubmitted the revised attendance policy on March 3, 2015; however, the director failed to submit supporting documentation confirming implementation of the policy.

On April 13, 2015, the new director submitted the original Board approved attendance policy. The director provided the attendance sign-in sheets for the PTE-D614 class, for a one - month period. It was noted that one student missed 2.5 days (20 hours) of theory classes. One *Remediation Plan* form was submitted for that student, which was dated prior to the attendance sheets submitted. The written reason for the deficiency: *"Pre Paid tickets at of tain prior to starting program."* [sic]. The form indicated the student was absent on February 14, 2015, missing a clinical day of eight (8) hours. A total of 2.25 hours of clinical was made up by, *listening to the "NA" meeting and writing a report*. The student signed the form on February 14, 2015, the instructor signed the form on April 6, 2015. The form was not signed by director. (See Attachment G)

Evidence the program is following the attendance policy was not provided.

ACN response: The new PD is actively involved in the student's progress. A review of all current students' progress is reviewed. Student services are to report any student nearing the 10% allowable in absences. The PD will meet with the students nearing the 10%



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allowable and give advisement. The PD will meet with students who exceed the 10% allowable and place them on Attendance probation with a mutually agreed upon action plan. (See Exhibit PT-V#8a: PT makeup work, PT probation, and Memo on absences and make up work.). The student signs the make-up plan to indicate agreement and commitment to satisfy the board required number of hours. The students are reminded that non-completion of the required hours will mean non-completion of the program and non-submission of BVNPT exit papers.

Section 2588(d) of the Psychiatric Technician 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 #10: As Noted in Violation #4, program representatives were unable to provide documentation substantiating the evaluation of clinical facilities.

Status #10: This violations is **not corrected**. The director reports that a clinical site evaluation calendar has been developed. However, to date, the director has failed to submit evidence that any clinical facilities have been evaluated.

ACN Response: Evaluation of clinical facility is conducted by our faculty and students for appropriateness and ability to meet the clinical objectives. Note that the students and instructors are not to wait until the last day of the rotation to make an evaluation if the facility no longer meets the clinical objectives of the rotation. Going forward, the Program Director plans to conduct spot checks on clinical sites on a regular basis to observe the student’s clinical experience as well as to evaluate the appropriateness of the facility’s ability to meet the clinical objectives. (See Exhibit PT-V#4a PT student clinical site eval and Exhibit PT-V#4b: PT Faculty clinical site evaluation)

Section 2584(b) of the Psychiatric Technician Rules and Regulations states:



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“Each psychiatric technician program shall have one faculty member, designated as director who meets the requirement of subsection (c)(1) herein who shall actively administer the program. The director is responsible for compliance with all regulations in Chapter 2, Article 5 (commencing with Section 2580 et seq.)”

Violation #11: On September 24, 2014, the Board was notified of the termination of the program director. The program had no Board – approved director actively administering the program from that time through December 16, 2014, when a new director was approved. The director was terminated on April 6, 2015.

On April 7, 2015 the Assistant Director and Administrator met with the Supervising Nursing Education Consultant and the assigned Nursing Education Consultant. The Assistant Director introduced herself as the Dean of Nursing. Neither of the American College of Nursing representatives could identify the number of current students in the program. On April 13, 2015, the Assistant Director was approved by the Board as director of the psychiatric technician program.

Observations during the onsite program inspection, evaluation of critical elements, and documents and information submitted subsequent to the onsite inspection confirm the lack of active program administration by a Board – approved director.

Status #11: This violation is **not corrected**. The program has failed to demonstrate consistent and active administration of the program by a Board – approved director. The new director was supplied the standard *New Director Orientation Packet*. The director stated that the orientation packet was inadequate and she would like to have at least a week of one-on-one orientation.

ACN response: The newly approved Program Director has been working in this capacity for over 6 years. Her employment track record indicates her commitment and determination to achieve compliance with the board and implement systems that would contribute to better training of future psychiatric technicians and to the improvement of the school in general. The new PD orientation packet was completed before the 2 week deadline. (Exhibit PT-V#11a: PD orientation checklist)



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All efforts are geared in putting American College of Nursing back on track and into excellence. I sincerely hope that these submissions merit the board's consideration and approval. Ms Jessica's availability and support is very much appreciated during this transition. The board has my full respect and cooperation as we partner in improving the education and training of our future nurses.

Sincerely,

A handwritten signature in blue ink that reads "Faye Silva".

Faye Silva, RN, BSN, MPH

PT Program Director

Agenda Item #19.B.1., 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

December 10, 2015

Faye Silva
Director, Psychiatric Technician Program
American College of Nursing
1855 Gateway Blvd., Tower II, Ste. 180
Concord CA. 94520

Regarding Reoccurrence of previous Violations

Dear Faye,

On October 14 and 15, 2014, Board representatives conducted an unannounced program onsite inspection of American College of Nursing Psychiatric Technician Program, where eleven (11) violations of the Psychiatric Technicians Rules and Regulations were identified. On May 15, 2015, the Board placed the program on provisional approval. On June 29, 2015, the program director provided the board with documentation representing that all violations as specified had been addressed.

On November 18 and 19, 2015, during an unannounced program onsite inspection of American College of Nursing Psychiatric Technician Program it was identified that six (6) of the violations were found to have reoccurred. The identified violations include:

Section 2581(a)(4) of the Psychiatric Technician Rules and Regulations states:

“The institution shall apply to the Board for approval. Written documentation shall be prepared by the director and shall include:
... (4) Curriculum Objectives.”

Section 2581(a)(8) of the Psychiatric Technician 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 2581(a)(16) of the Psychiatric Technician Rules and Regulation states:

“The institution shall apply to the Board for approval. Written documentation shall be prepared by the director and shall include:
... (16) Resources for provision of counseling and tutoring services for students.”

Section 2585(e) of the Psychiatric Technician Rules and Regulation states:

Reoccurrence of Previous Violations

December 10, 2015

Page 2 of 2

“Each instructor shall have a daily lesson plan which correlates the theory and practice offered to the student. A copy of this plan shall be available to the director.”

Section 2585(i) of the Psychiatric Technicians Rules and Regulations states:

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

Section 2584(b) of the Psychiatric Technician Rules and Regulations states:

“Each psychiatric technician program shall have one faculty member, designated as director who meets the requirement of subsection (c)(1) herein who shall actively administer the program. The director is responsible for compliance with all regulations in Chapter 2, Article 5 (commencing with Section 2580 et seq.).”

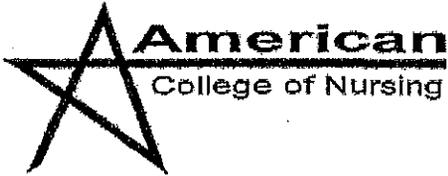
Please provide a letter explaining what has occurred that caused violations that appeared to have been corrected in June, 2015 to have reoccurred **no later than December 15, 2015.**

Sincerely,

Jessica Gomez

Jessica Gomez,
Nursing Education Consultant

Agenda Item #19.B.1., Attachment F



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December 12, 2015

Ms Jessica Gomez, MSN, RN
Nursing Education Consultant
Board of Vocational Nursing & Psychiatric Technicians
2535 Capitol Oaks Drive, Suite 205
Sacramento, CA 95833

Regarding Reoccurrence of previous Violations

Dear Ms Gomez,

This letter is in regard to our response to our Reoccurrence of previous violations in our PT Program.

The American college of Nursing would like to express our gratitude to you for your guidance and good counsel during this review process.

On November 18 and 19, 2015, during an unannounced program onsite inspection of American College of Nursing Psychiatric Technician Program it was identified that six (6) of the violations were found to have reoccurred. The Identified violations include:

Section 2581(a)(4) of the Psychiatric Technician Rules and Regulations states:

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

... (4) Curriculum Objectives."

ACN Response: This violation was corrected in the April 28, 2015 correspondence from the board to ACN:

"Section 2581(a)(4) of the Psychiatric Technician Rules and Regulations states:

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

... (4) Curriculum Objectives."

Violation #1: Board files confirm that the program has Board – approved curriculum objectives. However, the program was unable to provide a copy of the approved curriculum objectives or confirm that instruction provided students is consistent with the approved objectives and results in the completion of the approved program of instruction.

Status #1: This violation is corrected. On January 5, 2015, the program director submitted documentation confirming implementation of the Board - approved curriculum objectives for all theory and clinical courses."

There have been no changes since this response to the visit and that we have been delivering board approved curriculum objectives. The last day of the last PT cohort was August 10, 2015.

Based on our curriculum evaluations during our faculty meetings, we have decided to revise the current PT curriculum. Curriculum revision takes several months to create, process, and approve. This revision project will commence ASAP. We have notified our NEC of this curriculum revision plan and we submitted the VN curriculum revision. The PT curriculum will be next in line as soon as we have a chance to provide supporting documents for this PT violation response. If it pleases the board, we ask that this item be removed from this list of reoccurrence finding.

Section 2581(a)(8) of the Psychiatric Technician 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."

ACN Response: Our violation responses dated June 29, 2015 to the PT violations were addressed without further communications from the board to prove otherwise. Nonetheless, a new policy was created to more clearly define the evaluation methodology for curriculum. See exhibit A. As stated in the policy, curriculum discussions during our faculty meetings will be more specific in terms of curriculum program discussions i.e. discuss VN curriculum separately from discussing the PT curriculum.

Section 2581(a)(16) of the Psychiatric Technician Rules and Regulation states:

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

... (16) Resources for provision of counseling and tutoring services for students."

ACN Response: Upon notification that our previously posted counseling services are no longer posted, a new list of resources for counseling and other services in the Contra County was again displayed in the bulletin board located in the student

lounge. Additionally it is also posted in every classroom for easy visibility. See exhibit B for pictures.

Section 2585(e) of the Psychiatric Technician Rules and Regulation states:

"Each instructor shall have a daily lesson plan which correlates the theory and practice offered to the student. A copy of this plan shall be available to the director."

ACN Response: The PT lesson plans are being reviewed and revised to custom fit the lessons covered for the day. A partial submission is attached. See exhibit C lesson plans. The rest of the lesson plans will be submitted every week until the full submission is completed.

Section 2585(i) of the Psychiatric Technicians Rules and Regulations states:

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

ACN Response: At the time of the visit, November 18 and 19, 2015, ACN had no remediation plans for our PT program because the program ended in August 10, 2015 and none of the students were at risk for failing when the new Program Director took office. An evaluation methodology has been created immediately to evaluate student performance on a regular basis. See exhibit D evaluation methodology for academic progress.

Section 2584(b) of the Psychiatric Technician Rules and Regulations states:

"Each psychiatric technician program shall have one faculty member, designated as director who meets the requirement of subsection (c)(1) herein who shall actively administer the program. The director is responsible for compliance with all regulations in Chapter 2, Article 5 (commencing with Section 2580 et seq.)."

ACN Response: ACN has a BVNPT board approved PT Program Director who takes full responsibility for compliance with all regulations as well as ensuring the quality education of our PT students. This violation was addressed in our response dated

June 29, 2015 with my approval as PT Program Director on June 3, 2015. Below is a copy of our June 29, 2015 submission response to this violation.

"The newly approved Program Director has been working in this capacity for over 6 years. Her employment track record indicates her commitment and determination to achieve compliance with the board and implement systems that would contribute to better training of future psychiatric technicians and to the improvement of the school in general. The new PD orientation packet was completed before the 2 week deadline."

If it pleases the board, I would like to ask that this violation be removed from this list of reoccurrence finding.

I hope that these explanations meet your standards and I look forward to your response should there be any need for further clarifications.

Sincerely,



Faye Silva, RN, BSN, MPH

PT Program Director

American College of Nursing

Concord, CA



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February 26, 2016

This report is in compliance with the BVNPT requirement of a follow up report in ten months but no later than March 1, 2016 on page 11 of Agenda Item #17.B.1 dated April 28, 2015

ACN follow up report on the PT Program Violations:

Criteria	Follow up report:
Admission criteria	ACN continues to follow our admission requirements as stated in our PT student handbook. An audit of all PT student files indicates compliance.
Screening and selection criteria	All current PT students went through the admission screening and selection criteria.
Terminal objectives	The PT students are currently in Level 1 geared towards achieving the program's terminal objectives as approved by the board. ACN has submitted an application for curriculum revision on January 19, 2016 when the program director self-reported in late 2015 that our Mental Health 2 course did not cover developmental delay.
Curriculum Objectives	The PT students are meeting the curriculum objectives.
Instructional Plan	The board approved instructional plan is being implemented.
Theory and Clinical Objectives for each course	The theory objectives for each course are being implemented and the students are able to meet the course objectives. Their first clinical will start on March 6, 2016.
Lesson plans for each course	The lesson plans are in place and available to the instructors. The lesson plans will be revised to be more customized when the new curriculum is approved.
Textbooks	Textbooks meet the minimum requirements of the curriculum and terminal objectives. However, different textbooks have been identified in the new curriculum proposal to improve critical thinking and decision making.
Attendance policy	The attendance policy is being implemented. All 6 students are in good attendance.
Remediation policy	The remediation policy is being followed. The 6 students are diligent in their studies and come to class before the schedule to study individually or join a group study. 2 students remediated and passed. Since that remediation experience, they have shown improvement and maturity.

Evaluations of theory and clinical faculty	The theory faculties are meeting the course objectives and are effective in their instructions.
Evaluations of theory presentations	Theory presentations are engaging and interactive.
Evaluations of clinical rotations and their correlation to theory presentations	Clinical rotations are correlated to their theory classes. The current PT students are still in Fundamentals theory and their clinical experience in fundamentals will start on March 6, 2016.
Evaluation of student achievement	This current PT cohort started as a very quiet group but motivated to succeed. They are passing their courses and most of them come to campus before their scheduled class time to do a group study or individual study. They are developing cohesiveness among themselves.
Current enrollment	The PTE E1215 class started with 6 students and we still have 6 students.

Comprehensive analysis of the program:

American College of Nursing continues to strive to deliver good nursing education within our approved curriculum. We have submitted our curriculum revision on January 19, 2016 after we discovered that our Mental Health 2 course did not cover developmental delay which is a significant portion of their licensure examination. We are awaiting the approval of our curriculum revision proposal. We had changed our licensure preparation reviewer to help our students pass the licensure examination. This is an ongoing process as we evaluate what strategy is working and what is not. I believe we are on track. Our students are happy in the program. I have not yet received any student complaint. I voluntarily moved my office hours in the evening to be available to our students for any concerns or questions or support they might need.

Faye B. Silva 2-26-16
Faye B. Silva, RN, BSN, MPH
Dean of Nursing
American College of Nursing

Agenda Item #19.B.1., Attachment H

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March 29, 2016

This report is in compliance with the BVNPT requirement of a follow up report from the May 2016 board meeting due on April 1, 2016.

ACN follow up report on the PT Program:

Criteria	Follow up report:
Comprehensive analysis of the program	The current PT students are struggling with critical thinking and test taking skills. This is due partly to the quality of the current textbooks we are using. The current textbooks are very simplistic in nature and I find them lacking in content material. Most of the test questions are recall and comprehension type. We have already submitted our proposed new curriculum and we are hopeful that the new textbooks, class activities, and lesson plans would elevate the standards and stimulate our students to exercise critical thinking and improve their test taking. Since the MH1 and MH2 courses in the new curriculum proposal remains the same number of hours as in the current curriculum, I would like to request adaption of the MH1 and MH2 courses of the new curriculum with the current students. If this request is granted, this will greatly improve the content of the said courses without affecting the total number of hours and still remain in compliance with our currently approved curriculum.
Identification of program elements negatively impacting student achievement	The program elements that negatively impact student achievement are the textbooks and the flaw in the MH1 and MH2 courses.
Specific actions taken to improve pass rates	If our proposal above is granted, it will alleviate the gaps in mental health and developmental delay courses. If the proposed new curriculum is approved, the instructors can adapt the proposed lesson plans in order to supplement their teaching, thus adding more substance to the courses.
Timeline for implementation	Timeline would be based on the approval of the new curriculum and the approval of the adaption of MH1 and MH2 and the lesson plans to improve critical thinking and test taking.

BVNPT REC'D 4.1.16

Via Email JG

Agenda Item #19.B.1., Attachment H

Agenda Item #19.B.1., Attachment I



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BOARD OF VOCATIONAL NURSING & PSYCHIATRIC TECHNICIANS

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CERTIFIED MAIL

September 30, 2016

Faye Silva
Psychiatric Technician Program
American College of Nursing
1855 Gateway Blvd., Tower II, Ste. 180
Concord, CA. 94520

Subject: Psychiatric Technician Program - Notice of Violation

Dear Ms. Silva:

On September 14 and 15, 2016, the Board of Vocational Nursing and Psychiatric Technicians (Board) made an unannounced site visit to American College of Nursing. During the two-day visit, Board representatives assessed the physical resources for the program, inspected records for recently graduated and currently-enrolled students, and facilitated discussions with the program director. Following are the violations identified during the program inspection. Required corrective actions are listed with each violation.

Section 2582(b) of the Psychiatric Technician Rules and Regulations states:

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

Violation #1: This is a reoccurring violations. Board files confirm that the program has a methodology and procedure to notify the Board of faculty who terminate within 10 days. On September 2, 2016, during the initial examination of submitted documents for a request to admit students dated June 23, 2016, discrepancies in the reported faculty and Board documents were identified. Board approved faculty were not on the list of faculty provided by the director. Upon request for correction, the director submitted a termination notice for three (3) of the five (5) faculty, and identified two (2) has not been added to their faculty list upon Board approval.

Required Action: The director submitted documentation, and faculty applications to correct the violation. However, with the reoccurrence of the violation a pattern of compliance must be obtained to correct this violation.

Section 2585(i) of the Psychiatric Technicians Rules and Regulations states:

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

Violation #2: This is a reoccurring violation. Board files confirm that the program has a methodology and procedure for the evaluation of student progress. Evaluation of student files identified remediation documentation and provided a date for reevaluations. However, no evidence that the reevaluation occurred or followed-up of student progress was not identified. One remediation form stated that a student was required to retake a failed examination. No evidence that the examination was ever retaken was identified and the student remain in the program. An additional students records identified that a student failed the communication class. Per documentation identified in the student file and verbal communication with program director and program staff, the student remains in the program at the insistence of the student's mother.

Required Action: Provide a detailed written proposal, including timeline for implementation, for revision of the policies for evaluation of student progress and remediation, including minimum passing rate on examinations and appropriate follow-up with students.

Due no later than October 14, 2016.

Section 2585(h) of the Psychiatric Technician 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. . .”

- (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 #3: This is a reoccurring violation. Board files confirm that the program has an approved attendance policy. However, absences for clinical and theory were identified for two of the six current students. No evidence of make-up was identified.

Required Action: Provide documentation of make-up of missed hours and specific course objectives for which make-up time is required.

Due no later than October 14, 2016.

Section 2588(d) of the Psychiatric Technician 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 #4: This is a reoccurring violation. Board files confirm that the program has a methodology and procedure for evaluation of clinical facilities. However, Program representatives were unable to provide documentation confirming implementation of its approved methodology for the evaluation of clinical facilities. The only forms provided was student clinical performance evaluations. The forms identified at the last inspection were not provided and according to the director and staff had not been implemented.

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

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

Due no later than October 14, 2016.

Section 2584(b) of the Psychiatric Technician Rules and Regulations states:

"Each psychiatric technician program shall have one faculty member, designated as director who meets the requirement of subsection (c)(1) herein who shall actively administer the program. The director is responsible for compliance with all regulations in Chapter 2, Article 5 (commencing with Section 2580 et seq.)."

Violation #5: This is a reoccurring violation. Observations during the onsite program inspection, evaluation of critical elements, and identification of reoccurring violation verify that the program lacks active administration by a program director.

Required Action #5: Correct all current violations. Provide a plan with timeline to prevent further reoccurrence of violations or the development of new violations.

Due no later than October 14, 2016.

Section 2585(l) of the Psychiatric Technicians Rules and Regulations states:

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

Violation #6: Since placement on provisional approval the program's average annual pass rate has declined from Quarter 1 2015, at 22 percentage points above the state to the current Quarter 2 2016, at 25 percentage points below the state.

Required Action #6. Develop a plan to evaluate students through the program and implement processes to ensure students receive adequate remediation and tutoring to develop the knowledge to be safe practitioners, and pass the licensure examination. Additionally, develop a plan to evaluate and assist past graduates, who have not taken the CAPTLE licensure examination.

Due no later than October 14, 2016.

Be advised that the continuation of such a violation jeopardizes your program's approval. Please submit the following by the date listed below:

The Board requests the above information no later than **Friday, October 14, 2016.**

Should further information be needed, please feel free to contact me at (916) 263-7839

Sincerely,



**Kameka Brown, Ph.D., MBA. NP
Executive Officer**