

Agenda Item #13.C.1



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

BOARD OF VOCATIONAL NURSING & PSYCHIATRIC TECHNICIANS

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DATE: February 6, 2013

TO: Board Members

FROM: *Pam Hincheliff*
for Suellen Clayworth, M.N., R.N.
Nursing Education Consultant, Retired Annuitant

SUBJECT: NCP College of Nursing, Hayward, Vocational Nursing Program – Consideration of Request to Admit Students; and Consideration of Request to Modify Ongoing Admission Pattern (Director: Felicidad Silva, Alameda County – Private)

On December 17, 2012, the program director of NCP College of Nursing, Hayward, Vocational Nursing Program submitted a request for the full Board to reconsider the Executive Officer's decision dated December 6, 2012. In that decision the Executive Officer:

1. **Denied** the program's request to admit 30 full-time students on May 20, 2013; and
2. **Denied** the program's request to modify its ongoing admission pattern by phasing out all part-time classes and admitting three full-time classes per year to replace graduating students.
3. **Denied** the program's request for modification of approved ongoing admissions to three classes per year to **replace** graduating students.
4. **Rescinded** all previous approvals for ongoing admissions of full-time and part-time classes.
5. **Approved** ongoing admissions of two full-time classes per year to **replace** graduating students with the following stipulations:
 - a. No additional classes are added to the program's approved pattern of admissions without prior Board approval. The program's pattern of admissions includes admission of two full-time classes per year with 45 students per class.
 - b. The director documents that adequate resources, i.e. faculty and facilities, are available to support each admitted class of students.
 - c. The program's average annual pass rates remain compliant with regulatory requirements.

The program director specifically requests that the Board modify the program's ongoing admission pattern to 3 full-time classes per year with 45 students per class.

History of Prior Board Actions

(See Attachment A, History of Prior Board Action, February 8, 2002 – December 6, 2012)

Enrollment

The program is approved for ongoing admissions to **replace** graduating classes only. Currently, the program offers two (2) full-time and two (2) part-time classes per year. The full-time class is 41 weeks in length; the part-time class is 57 weeks in length. The program is approved to admit 45 students into each full-time and part-time class. The pattern of admissions for **current and projected** classes is seen in the enrollment table below.

The following table represents **current and projected** student enrollment based on class starts and completions. The table indicates a **maximum enrollment of 101 students** for the period **September 2011 through May 2013**.

ENROLLMENT DATA				
CLASS DATES		#Students Admitted	#Students Current or Completed	Total Enrolled
Start	Complete			
9/11 PT		25	22	22
1/12 FT		27	25	$22 + 25 = 47$
5/12 PT		20	19	$47 + 19 = 66$
7/12 FT		27	27	$66 + 27 = 93$
	1/13 (1/12 FT Class)		-25	$93 - 25 = 68$
1/13 FT		25 (projected)		$68 + 25 = 93$
	4/13 (9/11 PT Class)		-22	$93 - 22 = 71$
5/13 FT		30 (proposed)		$71 + 30 = 101$

The following statistics, furnished by the Pearson Vue and published by the National Council of State Boards of Nursing as "Jurisdictional Summary of All First-Time Candidates Educated in Member Board Jurisdiction," for the period October 2010 through December 2012, specify the pass percentage rate for graduates of the NCP College of Nursing, Hayward, Vocational Nursing Program on the National Council Licensure Examination for Practical (Vocational) Nurses (NCLEX-PN®).

NCLEX-PN® Licensure Examination Data						
Quarterly Statistics					Annual Statistics*	
Quarter	# Candidates	# Passed	% Passed	State Quarterly Pass Rate	Program Annual Pass Rate	State Annual Pass Rate
Oct – Dec 2010	20	16	80%	77%	79%	76%
Jan – Mar 2011	23	19	83%	80%	79%	77%
Apr – Jun 2011	14	11	79%	71%	78%	76%
Jul – Sep 2011	9	2	22%	74%	73%	76%
Oct – Dec 2011	14	10	71%	74%	70%	75%
Jan – Mar 2012	13	9	69%	77%	64%	74%
Apr – Jun 2012	15	9	60%	72%	59%	74%
Jul – Sep 2012	23	15	65%	74%	66%	74%
Oct – Dec 2012	27	19	70%	70%	67%	74%

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

Based on the most current data available (October to December 2012), the program's average annual pass rate is 67%. The California average annual pass rate for graduates from accredited vocational nursing programs who took the NCLEX-PN® for the first time is 74%. The average annual pass rate for NCP College of Nursing, Hayward, Vocational Nursing Program is seven (7) percentage points **below** the state average annual pass rate.

Faculty and Facilities

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

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

The number of Board-approved faculty totals 23 including the director. The director has 90% administrative and 10% teaching responsibility. Twenty-one (21) instructors are approved to teach clinical.

Based on a maximum enrollment of 101 students, seven (7) instructors are needed. Therefore, the number of current faculty is adequate for the current and proposed enrollment.

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

“Schools shall have clinical facilities adequate as to number, type, and variety of patients treated, to provide clinical experience for all students in the areas specified by Section 2533. There must be available for student assignment, an adequate daily census of patients to afford a variety of clinical experiences consistent with competency-based objectives and theory being taught.”

The program has sufficient clinical facilities to afford the number type and variety of patients that will provide clinical experience consistent with competency-based objectives and theory.

Other Considerations

In the letter from the program director submitted to the Board dated December 17, 2012, (See Attachment B), the director asked for clarification of the Executive Officer’s December 6, 2012, recommendations. The following questions were asked. The clarification follows each question.

1. Clarification of recommendation 5(b), “The director documents that adequate resources, i.e. faculty and facilities, are available to support each admitted class of students.”

Question: The director asked: “if this is to be reported with formal notification for each start or what the exact definition for “document.”

Answer: For classes that are approved in an ongoing admission pattern, the director is not required to submit documentation with each class start, but is required to keep the Board updated on any change in the availability of faculty and facilities including, but not limited to preparing updated list of faculty and facilities during the Annual Report process.

2. Clarification of recommendation 5(c), “The program’s average annual pass rates remain compliant with regulatory requirements.”

Question: The director asked: “We also would like clarification and definition for letter (c) if program’s average annual pass rate remain compliant with regulatory requirements is defined as not below 10 points of the State average for 8 consecutive quarters or 2 years.”

Answer: The Board’s stated goal is for programs to maintain a pass rate that is not lower than 10 percentage points below the State Average Annual Pass Rate. If a program’s pass rate remains lower than that for 8 consecutive quarters, the recommendation would be for a change in program status to provisional approval. The Board monitors pass rates on a continuous basis and if it is seen that a program’s pass rate is consistently dropping, interventions will be implemented to assist the program in improving its pass rate before a change in program status is warranted.

3. Clarification of recommendation 4, "**Rescinded** all previous approvals for ongoing admissions of full-time and part-time classes."

Question: The director asked, "Why ongoing admissions for 2 full-time and two part-time classes have been rescinded."

Answer: In the past there has been a history of the administration at NCP College of Nursing demonstrating misunderstanding regarding the meaning of Executive Officer decisions relevant to ongoing admissions. That misunderstanding led to classes being admitted without Board Approval at the South San Francisco campus. In order to achieve full clarity regarding the Executive Officer's decisions it was prudent to start with a clean slate and then add approved class admissions to the program's ongoing admissions pattern.

In the request that was considered by the Executive Officer on December 6, 2012, the program director stated, "The reason for phasing out the part time classes in this campus is mainly due to the challenges observed in the part time students such as fatigue, lack of focus, and lack of commitment because of work related demands. In addition, there appears to be higher community demand for full time classes because of our recent approval to offer financial aid." By including only full-time classes in the ongoing admission pattern, the director's request for phasing out the part-time classes was recognized. The new ongoing admission pattern then included only the previously approved two full-time classes per year, but increased the number of students per class from 30 to 45.

The proposed changes in the program's ongoing admission pattern to three full-time classes per year would have increased the total number of students admitted per year from 120 under the old admission pattern to 135. The results of discontinuing admission to part-time classes and denying the additional full-time class decreased the admissions per year to only 90 students in 2013, instead of the requested 135. That is more students than were admitted in 2012. As can be seen in the Enrollment Table, the program has not been reaching its current limit of 30 students per class. In 2012 the program only admitted a total of 74 students.

4. Clarification of the rationale concerning the Board reviewing pass rates from graduates who had the benefit of the revised curriculum.

In her letter the director indicates that the requested modification of ongoing admissions would decrease the number of cohorts. The letter implies the change would also decrease the number of students admitted. In fact, as mentioned earlier, changing from four classes of 30 students to three classes of 45 students actually increases the number of total students from 120 to 135. Since the

program's licensure examination results are currently marginal, it would be imprudent to admit additional students to the program until the results of the new curriculum are analyzed. The first class to complete the new curriculum will graduate in July 2013. Results from graduates testing could be available as early as the fourth quarter of 2013. If, as a result of other changes made by the program, the licensure examination results improve earlier, the program director may request additional students at that time.

In the letter submitted requesting the Board's reconsideration of the Executive Officer's Decisions, the program director also details the administrative reasons that it is important for the program to admit "at least" three classes per year. Those reasons include having already published the start date for the May 2013 class. The director states that, "The removal of ongoing approval specifically for May creates potential legal liability for NCP as students have made these time and fund commitments based on the published start dates." Based on that statement, it appears that the program admitted students into a class which had not yet been approved by the Board since the May 2013 class is an additional class not included in the previously approved ongoing admissions pattern. The full-time classes historically had been admitted in January and July of each year.

The rationale for the Executive Officer Decisions rendered on December 6, 2012, are as follows:

"The director has implemented curriculum changes with the goal of improving the program's licensure examination pass rates. Licensure examination statistics that reflect those changes will not be available until the fourth quarter of 2013 or the first quarter of 2014. The Board requires evidence that the curriculum changes will have a positive impact on the program's licensure examination pass rate before considering approval of additional classes. At the time the program's licensure examination pass rate demonstrates improvement, the program would be able to request additional class admissions.

Board staff will continue to monitor the program's effectiveness by tracking class admissions, the effectiveness of employed interventions, and the program's licensure examination pass rates each quarter."

On January 11, 2013, the director submitted 18 copies of documents to be submitted to Board members in support of their request to the Board. (See Attachment C) The documents included another copy of the letter referenced above and multiple other documents containing data; however, the director failed to describe how each of the data documents supported the program's request.

Recommendations:

1. **Deny** the NCP College of Nursing, Hayward, Vocational Nursing Program's request to admit 30 full-time students on May 20, 2013; and

2. **Approve** the program's request to modify its ongoing admission pattern by phasing out all part-time classes.
3. **Deny** increasing the number of full-time classes from two to three full-time classes per year to replace graduating students.
4. **Rescind** all previous approvals for ongoing admissions of full-time and part-time classes.
5. **Approve** ongoing admissions of two full-time classes per year to **replace** graduating students with the following stipulations:
 - a. No additional classes are added to the program's approved pattern of admissions without prior Board approval. The program's pattern of admissions includes admission of two full-time classes per year with 45 students per class.
 - b. The director documents that adequate resources, i.e. faculty and facilities, are available to support each admitted class of students.
 - c. The program's average annual pass rates remain compliant with regulatory requirements.

Rationale: The director has implemented curriculum changes with the goal of improving the program's licensure examination pass rates. Licensure examination statistics that reflect those changes will not be available until the fourth quarter of 2013 or the first quarter of 2014. The Board requires evidence that the curriculum changes will have a positive impact on the program's licensure examination pass rate before considering approval of additional classes. At the time the program's licensure examination pass rate demonstrates consistent improvement, the program would be able to request additional class admissions.

Of additional concern is that it appears the program advertised the proposed May 2013 class before that class had been approved.

Board staff will continue to monitor the program's effectiveness by tracking class admissions, the effectiveness of employed interventions, and the program's licensure examination pass rates each quarter.

Attachment A: History of Prior Board Actions

Attachment B: Letter from the program director submitted to the Board dated December 17, 2012

Attachment C: Documents submitted in support of the program's requests dated January 11, 2013

Agenda Item #13.C.1, Attachment A

History of Prior Board Actions

- On February 8, 2002, the Board approved commencement of the Nursing Care Providers, Hayward, Vocational Nursing Program with 1,558 hours (586 theory and 972 clinical) on February 25, 2002. An initial class of 30 students was authorized.
- On November 8, 2002, the Board granted full accreditation¹ for Nursing Care Providers, Hayward, Vocational Nursing Program for a four-year period from February 25, 2002, through November 7, 2006, and issued a certificate accordingly.

Additionally, the program was approved to admit a full-time class of 30 students starting January 27, 2003, to **replace** students graduating February 8, 2003 only.

- On June 20, 2003, the Board approved the program's request to increase frequency of admissions by admitting an additional full-time class with 30 students commencing July 19, 2003 only.
- On November 19, 2003, the Board approved the program's request to admit a full-time class of 30 students starting January 12, 2004 only, to **replace** students who graduated on December 19, 2003.
- On February 20, 2004, the Board approved the program's request to begin a part-time class of 30 students starting April 27, 2004 only, and graduating August 25, 2005.
- On May 14, 2006, the Board approved the program's request to admit 30 students into the full-time class starting June 28, 2004, to **replace** students graduating June 4, 2004.

Additionally, the Board approved ongoing admissions to **replace** graduating classes only, for the Nursing Care Providers, Hayward, Vocational Nursing Program with the stipulation that no additional classes are added to the program's current pattern of admissions without prior Board approval. The program's current pattern of admissions includes two full-time classes and two part-time classes per calendar year with 30 students per class.

- On September 8, 2006, the Board approved continued full accreditation of the Nursing Care Providers, Hayward, Vocational Nursing Program for a four year period, from November 6, 2006, through November 5, 2010, and issued a certificate accordingly.

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

- **On August 23, 2007, a new program director was approved.**
- On January 15, 2008, the director notified the Board that the program name had formally been changed to NCP College of Nursing, Hayward Vocational Nursing Program.
- On July 2, 2008, the Executive Officer approved the program's request to admit 45 students into the full-time class commencing July 21, 2008, thereby increasing the class size from 30 to 45 students per class.
- On December 8, 2008, the Executive Officer approved the program's request to increase the maximum enrollment per full – time class from 30 to 45 students to **replace** graduating students only. Additionally, the program's request to increase the maximum enrollment per part – time class from 30 to 45 students to **replace** graduating students only, was approved.
- On August 18, 2009, the Executive Officer approved NCP College of Nursing, Hayward, Vocational Nursing Program's request to commence a part–time evening class of 45 students on October 6, 2009, with a projected graduation of May 31, 2011.
- **On May 26, 2010, a new program director was approved.**
- On September 16, 2010, the Board received the Program Records Survey for continued accreditation.
- On October 14, 2010, the Board approved continued full accreditation for the Nursing Care Providers, Hayward, College Vocational Nursing Program for the period November 6, 2010 through November 5, 2014 and issued a certificate accordingly; **and**, continued to approve the program's current pattern of admissions which includes:
 - a. Ongoing admission of 45 students into the two (2) full-time classes each year to **replace** graduating students, only.
 - b. Ongoing admission of 45 students into the two (2) part-time classes each year to **replace** graduating students, only.
- On May 12, 2012, the Executive Officer approved the program's major revision of its full - time curriculum to include 1564 hours (Theory - 604; Clinical – 960); approved the program's revised full–time instructional plan; approved the program's major revision of its part - time curriculum to include 1564 hours (Theory - 604; Clinical – 960); and approved the program's revised part – time instructional plan.
- On December 6, 2012, the Executive Officer decisions were as follows:
 1. **Deny** the NCP College of Nursing, Hayward, Vocational Nursing Program's request to admit 30 full-time students on May 20, 2013; and

2. **Approve** the program's request to modify its ongoing admission pattern by phasing out all part-time classes.
3. **Deny** increasing the number of full-time classes from two to three full-time classes per year to replace graduating students.
4. **Rescind** all previous approvals for ongoing admissions of full-time and part-time classes.
5. **Approve** ongoing admissions of two full-time classes per year to **replace** graduating students with the following stipulations:
 - a. No additional classes are added to the program's approved pattern of admissions without prior Board approval. The program's pattern of admissions includes admission of two full-time classes per year with 45 students per class.
 - b. The director documents that adequate resources, i.e. faculty and facilities, are available to support each admitted class of students.
 - c. The program's average annual pass rates remain compliant with regulatory requirements.

Agenda Item #13.C.1, Attachment B



College of Nursing

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December 17, 2012

Board of Vocational Nursing and Psychiatric Technicians
Attn: Suellen Clayworth, M.N., R.N.
Nursing Education Consultant, Retired Annuitant
2535 Capitol Oaks Drive, Suite 205
Sacramento, CA 95833-2945

Re: December 6, 2012 – Executive Officer Approval of Recommendations for NCP College of Nursing - Hayward Campus

Dear Ms. Clayworth:

First, I wanted to thank you for your time in reviewing the issues surrounding the issue at hand which I believe were raised during the request to add a full-time class in May 2013. I am very aware that there are significant time and resource constraints with the Board due to volume of requests and I appreciate the time you have allocated for NCP.

I have reviewed our communications with Milo Jocson, President and COO, Araceli Antonio, RN, MS – NCP Board of Directors Member and Nursing Advisor and with Nelly A. Jocson RN, MA – CEO and Chair of NCP Board of Directors.

We were completely unaware that recommendations that adversely impact our NCP Hayward VN Program were submitted to the Executive Officer and then surprised when we received the official response to the request of changing our admissions pattern from 4 program starts to 3 program starts per year noted that the Executive Officer approving the recommendations that included rescinding all previous on-going admissions patterns.

NCP College of Nursing Hayward Campus would like to formally request reconsideration of the Executive Officer's approval of recommendations in the upcoming Board meeting scheduled for February 20, 2013 in Los Angeles.

We respectfully submit the following:

1. NCP thanks the Board for approving on-going admissions for two (2) full-time classes per year to replace graduating students. We wanted to clarify letter (b) regarding documented resources if this is to be reported with formal notification for each start or what the exact definition for "document." We also would like clarification and definition for letter (c) if program's average annual pass rate remain compliant with regulatory requirements is defined as not below 10 points of the State average for 8 consecutive quarters or 2 years.

2. Request the reconsideration of the Executive Officer in rescinding all previous approvals for ongoing admissions for full-time and part-time classes. We would like clarification from the Board why on-going admissions for 2 full-time and 2 part time classes have been rescinded. We would like clarification from the Board on the decisions of the December 6, 2012 recommendation approvals with respect to the BVNPT Practice Act. NCP Hayward Campus is not on probation and upon reviewing the Practice Act, we could not find any regulation or code that identifies a school action or performance where the Board would rescind previous approvals.

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

(1) Failure to maintain the required yearly average minimum pass rate for two years or eight consecutive quarters may be cause to place a program on provisional accreditation.

3. Request the reconsideration of the request to modify on-going admissions to 3 full time classes per year. The purpose for this request was to decrease the 4 approved classes (2 full time and 2 part-time) to 3 full time classes in order to decrease the number of students being managed by the Hayward Campus and also to remove all part-time classes which have presented on-going performance/attendance challenges for students who work full time while attending these part time classes. The purpose is to increase the NCLEX pass rates by concentrating resources to fewer students who are primarily non-working full time students.
4. Request clarification of the rationale that describes new curriculum changes implemented by the NCP director would not have statistics available until first quarter of 2014. The rationale directly refers to basing approval of additional classes based on evidence that curriculum changes positively impacts the program performance and NCLEX pass rates. The clarification requested references item # 3 of this letter as NCP has proactively taken steps to reduce number of cohorts in addition to modifying the curriculum. It is our interpretation that the introduction and Board approval of an updated curriculum for the purposes of improving pass rates has triggered rescinding of existing approvals. We could not find any regulation or code in the BVNPT Practice Act that curriculum updates or approvals could result in the rescinding of existing approvals or other adverse action.
5. There have been numerous discussions over the phone and e-mail regarding the intent of the Executive Officers actions and the Board's direction in oversight of the quality of Vocational Programs in California and specifically in increasing NCLEX pass rates. NCP College of Nursing is in total agreement that it is everyone's best interest - the public and our student body - that vocational nursing programs must continue to improve the quality of educational delivery to our students and strive for high NCLEX pass rates. However, our Hayward Campus has been utilizing the on-going pattern of 4 program starts per year since 2010 and the reduction to 2 program starts per year creates a significant impact to NCP Hayward Operations:
 - a. Our Admissions practice and organizational structure is based announcing at least three (3) program starts one year in advance and recommend that that all

interested applicants plan work, personal and professional schedules accordingly so that maximum preparation for the scheduled starts are completed well in advance of the start as well as to reduce as many non-academic commitments and distractions as possible by the program start date. Preparation includes meeting with NCP Admissions, referrals to tutoring services for those with reading and math challenges, applicant observation of existing classes and many other valuable opportunities for inbound applicants. Without a published schedule for at least three (3) program starts at least one year in advance, NCP would not be able to provide the best qualified applicants enough preparation time because of decreased choices and options for start times at even intervals throughout the year. It would increase the volume of last minute applicants to the programs since only 2 starts can be announced at any given time. Many applicants would not commit to our process of advanced preparation recommendations due to the uncertainty created by inserting an unapproved start status. Many more applicants would simply drop interest in the NCP program with some starts as published approved and some unapproved/pending - this would actually contradict our Admissions practice of recommending advance planning for all program starts.

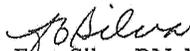
- b. There are students already on our master interest list for published scheduled starts in May and September 2013, some that have already committed time and funds in taking creditable/transferable courses to be applied to these published program starts. The removal of on-going approval specifically for May creates potential legal liability for NCP as students have made these time and fund commitments based on the published start dates.
- c. Part of NCP's quality improvement process is ensuring the retention of the best faculty possible and with as many of our staff in full time roles when possible. The inability to have a 3rd approved program starts creates the inability to schedule faculty in advance and to structure our curriculum and instructional delivery around this model. It will create increased use of part-time or on-call faculty, increase instructor turnover and impact our goal of tenure and longevity. Again, the impact to achieving high NCLEX pass rates is significant.
- d. Our administrative teams would also be impacted by the inability to publish no more than two (2) starts at a time. It will lead to turnover since in the last seven (7) years, our staffing and organizational structure has always been based on a pattern of at least three (3) on-going starts with options for a fourth start. Our students are supported by a very dedicated full time team of student services, financial aid and administrative support personnel. NCP has undergone several accreditation visits and audits in 2012 by BPPE, DPH and ACCSC as well as external quality assurance consultants. We have received positive comments from these agencies about the professionalism of NCP's administrative staff. The inability to map out schedules and budgets for at least three (3) starts creates a severe impact as the Vocational Nursing Program is the only licensed program offering at NCP. We do not have the ability to redeploy resources to other licensed programs unlike other larger institutions that have multiple licensed program offerings. Without a stable and tenured support team, our student's ability to succeed will suffer as our

students have described our support teams as instrumental in their academic success and personal motivation.

6. Our records show that NCP Hayward Campus has had relatively good success. We have had several challenging years in 2011 and 2012 but we are confident NCP Hayward Campus will trend back to higher NCLEX performance through important changes implemented by our Program Directors working together from both of our campuses and adjustments to an ever-changing demographic student body. These changes include:
 - a. Changes in curriculum to specifically adding additional levels to reduce possibility of low performing students to move through the program without sufficient academic merit.
 - b. Incorporate of ATI reviews beginning through the end of every program with correlated pre-NCLEX test reviews
 - c. Increased mentorship by Program Directors with faculty
 - d. Addition of a Assistant Program Director in late 2011 who was promoted to Program Director in September 2012 so that Hayward Campus has a dedicated Program Director
 - e. NCLEX review sessions conducted by Program Directors starting in Q1 2012.
 - f. Increased training and professional development for faculty
 - g. Phase out of part-time evening/weekend program with the strategy that only full time day programs will allow students to take programs in a shorter duration without the distraction of work and personal schedules
 - h. Qualification of Title IV Financial Aid and implementation in March 2012 to reduce financial burden for qualified students which allows them to fully concentrate on academic demands of the program
 - i. Implementation of "Success Contracts" for all students that obligates students to follow a strict, monitored and regimented timeline from one week success orientation prior to day one of program through post-graduate review for NCLEX. Contract allows NCP to control and manage all aspects of academic schedules, NCLEX testing appointments and tracks student individually from Admissions through NCLEX passing through job placement.

We respectfully ask the Board to please review our 6 points of submission and to consider our request of not rescinding its approved pattern of 4 classes and allow NCP Hayward Campus to restructure on-going admissions pattern to 3 full time for the purposes of reducing its cohort numbers to increase our NCLEX performance. This request is vital to continuing the operations of the NCP Hayward Campus and to the success of the VN Program and our students. Thank you for your time and consideration.

Sincerely,


Faye Silva, RN, MPH
Vocational Nursing Program Director
NCP College of Nursing

MAJ/

Agenda Item #13.C.1 Attachment C



NCP College of Nursing

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BVNPT Received EDL
on 1/10/13 with DJ

January 10, 2013

Ms. Suellen Clayworth MN, RN Nursing Education Consultant
Board of Vocational Nursing and Psychiatric Technicians
2535 Capitol Oaks Drive
Sacramento, CA 95833

***Subject: Full Board Reconsideration of Executive Officer's Decision dated December 6,
2012 – Additional Documents***

Dear Ms. Clayworth,

Per your letter of January 2, 2013, we are submitting the 18 sets of additional documents plus one (1) CD. These documents reference NCP College of Nursing Hayward Campus request for Board Reconsideration.

NCP is always grateful to the BVNPT for its continued support and guidance. Thank you for your assistance.

Sincerely,

A handwritten signature in cursive script that reads 'Faye Silva'.

Faye Silva, RN, MPH

Program Director

NCP College of Nursing

Hayward Campus

21615 Hesperian Blvd, Suite A

Hayward, CA 94541

510-785-0454 x 305

Email: Faye.silva@ncpcollegeofnursing.edu



January 2, 2013

Felicidad Silva, Director
NCP College of Nursing, Hayward Campus
Vocational Nursing Program
21615 Hesperian Blvd., Suite A
Hayward, CA 94541

Subject: Full Board Reconsideration of Executive Officer's Decision dated December 6, 2012

Dear Ms. Silva:

On February 22, 2013, the Board of Vocational Nursing and Psychiatric Technicians (Board) is scheduled to consider the subject listed above relative to the ***NCP College of Nursing, Hayward, Vocational Nursing Program***.

To ensure dissemination to individual Board members and relevant staff for timely consideration at the February 22, 2013 Board Meeting, please submit:

- Eighteen (18) copies of any pertinent documents that you desire Board members to consider. Please remember existing statutes require that any document considered by the Board will become a public record. Accordingly, please redact all names of students.
- In addition, please provide any information that you submit for the Board members on a compact disc (CD) for Board use. Again, please remember to redact any student names prior to copying information onto the CD.

To ensure dissemination and review by Board Members prior to the meeting, the deadline for submission of the requested documents and the CD is **Friday, January 11, 2013**.

Although the primary purpose of this letter is to convey the Board's need for the copies, please be assured that, if timely submitted, any correspondence and attachments will be reviewed and, if appropriate, information submitted may be included in the report of the assigned consultant.

Please do not hesitate to contact the Board at (916) 263-7843 should you have questions.

Sincerely,

Suellen Clayworth

SUELLEN CLAYWORTH, M.S., R.N.
Nursing Education Consultant – Retired Annuitant



College of Nursing

Educate | Grow | Succeed

December 17, 2012

Board of Vocational Nursing and Psychiatric Technicians
Attn: Suellen Clayworth, M.N., R.N.
Nursing Education Consultant, Retired Annuitant
2535 Capitol Oaks Drive, Suite 205
Sacramento, CA 95833-2945

Re: December 6, 2012 – Executive Officer Approval of Recommendations for NCP College of Nursing - Hayward Campus

Dear Ms. Clayworth:

First, I wanted to thank you for your time in reviewing the issues surrounding the issue at hand which I believe were raised during the request to add a full-time class in May 2013. I am very aware that there are significant time and resource constraints with the Board due to volume of requests and I appreciate the time you have allocated for NCP.

I have reviewed our communications with Milo Jocson, President and COO, Araceli Antonio, RN, MS – NCP Board of Directors Member and Nursing Advisor and with Nelly A. Jocson RN, MA – CEO and Chair of NCP Board of Directors.

We were completely unaware that recommendations that adversely impact our NCP Hayward VN Program were submitted to the Executive Officer and then surprised when we received the official response to the request of changing our admissions pattern from 4 program starts to 3 program starts per year noted that the Executive Officer approving the recommendations that included rescinding all previous on-going admissions patterns.

NCP College of Nursing Hayward Campus would like to formally request reconsideration of the Executive Officer's approval of recommendations in the upcoming Board meeting scheduled for February 20, 2013 in Los Angeles.

We respectfully submit the following:

1. NCP thanks the Board for approving on-going admissions for two (2) full-time classes per year to replace graduating students. We wanted to clarify letter (b) regarding documented resources if this is to be reported with formal notification for each start or what the exact definition for "document." We also would like clarification and definition for letter (c) if program's average annual pass rate remain compliant with regulatory requirements is defined as not below 10 points of the State average for 8 consecutive quarters or 2 years.

2. Request the reconsideration of the Executive Officer in rescinding all previous approvals for ongoing admissions for full-time and part-time classes. We would like clarification from the Board why on-going admissions for 2 full-time and 2 part time classes have been rescinded. We would like clarification from the Board on the decisions of the December 6, 2012 recommendation approvals with respect to the BVNPT Practice Act. NCP Hayward Campus is not on probation and upon reviewing the Practice Act, we could not find any regulation or code that identifies a school action or performance where the Board would rescind previous approvals.

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

(1) Failure to maintain the required yearly average minimum pass rate for two years or eight consecutive quarters may be cause to place a program on provisional accreditation.

3. Request the reconsideration of the request to modify on-going admissions to 3 full time classes per year. The purpose for this request was to decrease the 4 approved classes (2 full time and 2 part-time) to 3 full time classes in order to decrease the number of students being managed by the Hayward Campus and also to remove all part-time classes which have presented on-going performance/attendance challenges for students who work full time while attending these part time classes. The purpose is to increase the NCLEX pass rates by concentrating resources to fewer students who are primarily non-working full time students.
4. Request clarification of the rationale that describes new curriculum changes implemented by the NCP director would not have statistics available until first quarter of 2014. The rationale directly refers to basing approval of additional classes based on evidence that curriculum changes positively impacts the program performance and NCLEX pass rates. The clarification requested references item # 3 of this letter as NCP has proactively taken steps to reduce number of cohorts in addition to modifying the curriculum. It is our interpretation that the introduction and Board approval of an updated curriculum for the purposes of improving pass rates has triggered rescinding of existing approvals. We could not find any regulation or code in the BVNPT Practice Act that curriculum updates or approvals could result in the rescinding of existing approvals or other adverse action.
5. There have been numerous discussions over the phone and e-mail regarding the intent of the Executive Officers actions and the Board's direction in oversight of the quality of Vocational Programs in California and specifically in increasing NCLEX pass rates. NCP College of Nursing is in total agreement that it is everyone's best interest - the public and our student body - that vocational nursing programs must continue to improve the quality of educational delivery to our students and strive for high NCLEX pass rates. However, our Hayward Campus has been utilizing the on-going pattern of 4 program starts per year since 2010 and the reduction to 2 program starts per year creates a significant impact to NCP Hayward Operations:
 - a. Our Admissions practice and organizational structure is based announcing at least three (3) program starts one year in advance and recommend that that all

interested applicants plan work, personal and professional schedules accordingly so that maximum preparation for the scheduled starts are completed well in advance of the start as well as to reduce as many non-academic commitments and distractions as possible by the program start date. Preparation includes meeting with NCP Admissions, referrals to tutoring services for those with reading and math challenges, applicant observation of existing classes and many other valuable opportunities for inbound applicants. Without a published schedule for at least three (3) program starts at least one year in advance, NCP would not be able to provide the best qualified applicants enough preparation time because of decreased choices and options for start times at even intervals throughout the year. It would increase the volume of last minute applicants to the programs since only 2 starts can be announced at any given time. Many applicants would not commit to our process of advanced preparation recommendations due to the uncertainty created by inserting an unapproved start status. Many more applicants would simply drop interest in the NCP program with some starts as published approved and some unapproved/pending - this would actually contradict our Admissions practice of recommending advance planning for all program starts.

- b. There are students already on our master interest list for published scheduled starts in May and September 2013, some that have already committed time and funds in taking creditable/transferable courses to be applied to these published program starts. The removal of on-going approval specifically for May creates potential legal liability for NCP as students have made these time and fund commitments based on the published start dates.
- c. Part of NCP's quality improvement process is ensuring the retention of the best faculty possible and with as many of our staff in full time roles when possible. The inability to have a 3rd approved program starts creates the inability to schedule faculty in advance and to structure our curriculum and instructional delivery around this model. It will create increased use of part-time or on-call faculty, increase instructor turnover and impact our goal of tenure and longevity. Again, the impact to achieving high NCLEX pass rates is significant.
- d. Our administrative teams would also be impacted by the inability to publish no more than two (2) starts at a time. It will lead to turnover since in the last seven (7) years, our staffing and organizational structure has always been based on a pattern of at least three (3) on-going starts with options for a fourth start. Our students are supported by a very dedicated full time team of student services, financial aid and administrative support personnel. NCP has undergone several accreditation visits and audits in 2012 by BPPE, DPH and ACCSC as well as external quality assurance consultants. We have received positive comments from these agencies about the professionalism of NCP's administrative staff. The inability to map out schedules and budgets for at least three (3) starts creates a severe impact as the Vocational Nursing Program is the only licensed program offering at NCP. We do not have the ability to redeploy resources to other licensed programs unlike other larger institutions that have multiple licensed program offerings. Without a stable and tenured support team, our student's ability to succeed will suffer as our

students have described our support teams as instrumental in their academic success and personal motivation.

6. Our records show that NCP Hayward Campus has had relatively good success. We have had several challenging years in 2011 and 2012 but we are confident NCP Hayward Campus will trend back to higher NCLEX performance through important changes implemented by our Program Directors working together from both of our campuses and adjustments to an ever-changing demographic student body. These changes include:
 - a. Changes in curriculum to specifically adding additional levels to reduce possibility of low performing students to move through the program without sufficient academic merit.
 - b. Incorporate of ATI reviews beginning through the end of every program with correlated pre-NCLEX test reviews
 - c. Increased mentorship by Program Directors with faculty
 - d. Addition of a Assistant Program Director in late 2011 who was promoted to Program Director in September 2012 so that Hayward Campus has a dedicated Program Director
 - e. NCLEX review sessions conducted by Program Directors starting in Q1 2012.
 - f. Increased training and professional development for faculty
 - g. Phase out of part-time evening/weekend program with the strategy that only full time day programs will allow students to take programs in a shorter duration without the distraction of work and personal schedules
 - h. Qualification of Title IV Financial Aid and implementation in March 2012 to reduce financial burden for qualified students which allows them to fully concentrate on academic demands of the program
 - i. Implementation of "Success Contracts" for all students that obligates students to follow a strict, monitored and regimented timeline from one week success orientation prior to day one of program through post-graduate review for NCLEX. Contract allows NCP to control and manage all aspects of academic schedules, NCLEX testing appointments and tracks student individually from Admissions through NCLEX passing through job placement.

We respectfully ask the Board to please review our 6 points of submission and to consider our request of not rescinding its approved pattern of 4 classes and allow NCP Hayward Campus to restructure on-going admissions pattern to 3 full time for the purposes of reducing its cohort numbers to increase our NCLEX performance. This request is vital to continuing the operations of the NCP Hayward Campus and to the success of the VN Program and our students. Thank you for your time and consideration.

Sincerely,



Faye Silva, RN, MPH
Vocational Nursing Program Director
NCP College of Nursing

MAJ/

Exhibit 5A

HFT-23

1	Vandrea, Gisela	510-771-5207	vandrea10311@yahoo.com	63%	NCP	NCP	
2	Vable, Maria	415-555-1311	marvabile@yahoo.com	85%	NCP	Tested out of GP -	
3	Vafantio, Rose	510-538-5418	rosevafantio@yahoo.com	64%	Chabot	Chabot	need to apply FAFSA
4	Vannoy, Catherine	510-933-0205	cathvannoy11@gmail.com	69%	NCP - 1/21/2013	NCP - 11/2012	
5	Vera, Rena	408-985-1115	renaverera@yahoo.com		NCP	NCP	
6	Veras, Francisca	510-221-1302	francisca.veras@gmail.com		NCP	NCP	
7	Vera, Nicole	510-799-1427	sunshine_bonnie@yahoo.com		NCP	Chabot	
8	Ventura, Meg Rose	510-345-3726	megrose@gmail.com		NCP	NCP	
9	Vera, Aida Vandana	510-735-7303	aidavandana@gmail.com		NCP - 1/2013	NCP - 11/2012	
10	Vera, Nadeep	510-437-3443			NCP - 1/2013	NCP - 3/2013	
11	Verrill, Stephanie	510-331-3313	stverrill@yahoo.com		NCP - 1/2013	NCP - 11/2012	
12	Vesey, Elvira	510-433-2352	elviravesey@yahoo.com		NCP - B	NCP	
13	Vesey, Kayal	415-723-4130	kayalvesey21@gmail.com		NCP	NCP - 11/19/2012	
14	Vespa, Srikanya	510-327-0271	srikanya@yahoo.com		NCP - C	NCP - 11/19/2012	
15	Vera, Mary Joyce	206-514-1027	maryjoycevera@gmail.com		NCP - B+	NCP	
16	Veterson, Nayana	510-431-3143	nayaveterson@yahoo.com		NCP - C	NCP	
17	Vidmaric, Dana	707-532-4396	davidavidmaric@yahoo.com		NCP - 1/21/2013	NCP - 11/19/2012	
18	Vidmaric, Lisa	209-307-3072	lisa@lismom@yahoo.com		NCP - B	NCP - B	applied FA- met with student
19	Vidmaric, Angela	925-222-7191	angela@vidmaric.com		NCP - B+	NCP - B	
20	Vidmaric, Nela	510-545-2154	nelavidmaric@yahoo.com		NCP	Chabot?	
21	Vidmaric, Madina	510-332-0041	madinavidmaric@sharifal.net		NCP	NCP - 11/2012	
22	Vidmaric, Irene	510-633-5343	iravidmaric@gmail.com		NCP	NCP	
23	Vidmaric, Radhika	510-205-7323	radhikavidmaric@gmail.com		NCP - C	NCP - 11/2012	
24	Vidmaric, Courtney	510-624-2142	courtneyvidmaric@gmail.com		Laney - In progress	NCP - C	applied FAFSA 08/29/12
25	Vidmaric, Kristine Marie	510-207-4477	kristinevidmaric@gmail.com		NCP - 01/2013	NCP - 11/2012	
26	Vidmaric, Kristine	525-833-7726	kristinevidmaric@gmail.com		NCP - 1/21/2013	NCP - 11/2012	
27	Vidmaric, Ursula	510-223-9512	ursulavidmaric@yahoo.com		NCP - 1/21/2013	NCP - 11/2012	
28	Vidmaric, Sumera	510-220-3700	sumera@vidmaric.com		NCP	outside of NCP	emailed regarding transcript and CD for GP 10/31 ss
29	Vidmaric, Barbara	510-223-5938	barbaravidmaric@gmail.com		NCP - 1/21/2013	NCP - 11/19/2012	
30	Vidmaric, Ravee	680-421-5333	raveevidmaric@gmail.com		NCP - B	NCP - B	need to apply FAFSA
31	Vidmaric, Patricia	510-711-3446	patvidmaric@gmail.com		NCP	NCP	
32	Vidmaric, Gino	510-711-4137	gino@vidmaric.com		Outside of NCP	NCP	
33	Vidmaric, Kathy	510-573-5023	kathyvidmaric@gmail.com		NCP - 1/21/2013	outside of NCP	
34	Vidmaric, Latonya	510-240-2451	latonyavidmaric@gmail.com	scheduled 12/21/201	NCP - 04/11/2012	outside of NCP	



Possible Institutions that Students Can Use to Review Math/English in the Hayward area:

1. **Hayward Adult School:** 22100 Princeton St Hayward, CA 94541; (510)293-8595 | fax: (510)727-1139 | general questions: questions@has.edu.
2. **Castro Valley Adult School:** 4430 Alma Avenue Castro Valley, CA 94546; (510) 886-1000
3. **New Haven Adult School:** 600 G Street Union, City, CA 94587; Phone: (510) 489-2185 | Fax: (510) 471-0554
4. **Fremont Adult and Continuing Education:** 4700 Calaveras Avenue Fremont, CA 94568; (510) 793-6465 | fax: (510) 793-2271 | general questions: www.face.edu
5. **Oakland Adult and Career Education:** 2607 Myrtle Street Oakland, CA 94607; Phone: 510-273-2310 | Fax: 510-874-3769 | Website: <http://www.ousdace.org>
6. **Chabot Tutoring Services – P.A.T.H.:** 25555 Hesperian Blvd. Hayward, CA 94545 Building 2300 Room 2351; (510) 723-6920
7. **Laney College Tutoring Services – TRIO:** 900 Fallon St, Oakland, CA 94607 Student Center Room 300; (510) 986-6928; triolaney@peralta.edu
8. **Alameda College Learning Resource Center:** 555 Ralph Appenzato Memorial Parkway Alameda, CA 94501 2nd Floor of the Library – L234, L235, L226 (in the back behind the elevator); (510) 522-7221
9. **Merritt College Learning Center:** 12500 Campus Dr. Oakland, CA 94619; (510) 436-2442+
10. **Ohlone Tutoring Center:** 43600 Mission Boulevard, Fremont, CA 94539 Tutoring Center, Room HH-217 Hyman Hall, second floor, Fremont campus; (510) 659-6087

South San Francisco:

1. **College of San Mateo:** 1700 West Hillsdale Boulevard San Mateo, CA; (650) 574-6161
2. **Skyline College:** 3300 College Drive San Bruno, CA 94066; (650) 738-4100
3. **Cañada College:** 4200 Farm Hill Boulevard Redwood City, CA 94061; (650) 306-3100
4. **City College of San Mateo:** 50 Phelan Ave San Francisco, CA 94112; (415) 239-3000
5. **So. SF Adult School:** 825 Southwood Drive, South San Francisco, CA, 94080; (650) 877-8844



Tutoring Session Schedule 2013

Sessions are scheduled for 2:00 PM – 4:30 PM

Hayward:

March 5th and 7th, 2013

April 2nd and 4th, 2013

May 7th and 9th, 2013

July 2nd and 4th, 2013

August 6th and 8th, 2013

September 3rd and 5th, 2013

South San Francisco:

March 12th and 13th, 2013

April 9th and 11th, 2013

May 14th and 16th, 2013

June 4th and 6th, 2013

July 9th and 11th, 2013

August 13th and 15th, 2013

September 10th and 12th, 2013

NOTE: *These tutoring sessions are only to be used as a supplementary source to the materials covered in the HOBET V Exam. Students are encouraged to study beforehand to receive optimal results. The HOBET V Study Guide is highly recommended by the Admissions Department for students to use in their studies prior to the tutoring sessions.*



Exhibit 5D

http://www.cpr.ca.gov/enforcement/inspection_results.html?...

Compliance Inspection Res...

CNN YouTube Games Celebrity Amazon Word of the Day Weather E-mail

Google Search Share More Sign In

bing

NATIONAL COLLEGE OF TECHNICAL INSTRUCTION, INSTITUTION #3403691
333 Sunrise Blvd., Suite 500
Roseville, CA 95661
Date of Inspection: 08/07/2012
No Minor Violations Detected

NATIONAL HOLISTIC INSTITUTE, INSTITUTION #0101321
5900 Davis Street
Emeryville, CA 94608
Date of Inspection: 08/09/2012
[Notice to Comply Issued](#)

NATIONAL LEGAL STUDIES INSTITUTE, INSTITUTION #21977813
23962 Alessandro Boulevard
Moreno Valley, CA 92553
Date of Inspection: 09/17-18/2012
[Notice to Comply Issued](#)

NCP COLLEGE OF NURSING (BRANCH), INSTITUTION #50123279
21615 Hesperian Blvd., Suite A
Hayward, CA 94541
Date of Inspection: 08/03/2012
No Minor Violations Detected

NCP COLLEGE OF NURSING, INSTITUTION #4162141
257 Longford Drive, #5
South San Francisco, CA 94080
Date of Inspection: 08/02/2012
No Minor Violations Detected

NEWBRIDGE COLLEGE, INC., INSTITUTION #3008511 (Main)
1840 East 17th Street, Suite 140
Santa Ana, CA 92705
Date of Inspection: 05/15/2012
No Minor Violations Detected

NEWBRIDGE COLLEGE, INC., INSTITUTION #58707708 (Branch)
3799 East Burnett Street
Long Beach CA 90815
Date of Inspection: 05/17/2012
No Minor Violations Detected

NEW CA CONSERVATORY OF MUSIC, INSTITUTION #29369784

210 PA
15/21B

Exhibit 5D

Message: ACCSC Findings So Far - Updated at 3:30pm October 17, 2012 - Message (HTML)

Ignore, Delete, Reply, Reply All, Forward, More, Reply & Delete, Create New, Move, Actions, Mark Unread, Categorize, Follow Up, Translate, Related, Select, Zoom

You replied to this message on 10/22/2012 12:27 PM.
This message was sent with High importance.

From: Niki Jackson
To: Faye Silva; Rolando Jacobo; Maria Santos; Emilia Skizundary; Hilda Montano; Kalle Ramirez; Arva Jacobo; Cristina Deter; Liza Araya
Cc: Araceli Antonio; Nelly Jackson
Subject: ACCSC Findings So Far - Updated at 3:30pm October 17, 2012

Sent: Wed 10/17/2012 4:38 PM

Final general findings to date:

- Faculty and student files are in excellent order and documentation
- Curriculum and VN Program content and equipment meet and/or exceeds expectations programmatically and educationally
- It did not appear that instructors were interviewed in this process although some Operations team members were interviewed with positive feedback

Click on a photo to see social network updates and email messages from this person.

2:38 PM 1/9/2013

Exhibit 6A

Theory

Fundamentals: 54hrs = 9 days
 Communications: 24hrs = 4 days
 Nursing Process: 15 hrs = 2.5 days
 Nutrition: 15 hrs = 2.5 days
 Medical Surgical I: 120 hrs = 20 days

NCP College of Nursing VN Program - HFT20 Level I - Hayward Campus January 2012

Clinical and Skills

Fundamentals Skills: 72hrs = 12 days
 Fundamental clinical: 45hrs = 6 days
 MS clinical: 279hrs = 38 days
 MS skills = 36 hrs = 6 days

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23 VN Orientation 8-3pm Ms. Faye Silva	24 8am-ATI Orientation 9-3- Making Your Mark Ms. Gloria Boehm-Yu	25 8-3pm Math for Nurses Medical Terminology Mr. Randal Rehling	26 8-3pm Medical Terminology Ms. Nicole Ware	27 8-9:30 - Mr. Rolando Jaochico 10am- CPR class Mr. Roger Wallace	28
29	30 Fundamentals Theory Boehm-Yu/ 8-3pm	31 Fundamentals Theory Boehm-Yu/ 8-3pm				

Theory:

Fundamentals - 54 hrs
 Communications - 24 hrs
 Nursing Process - 15 hrs
 Nutrition - 15 hrs
 Pharmacology - 54 hrs
 MSI - 120 hrs

NCP College of Nursing
 VN Program - HFT21
 Hayward Campus
 July 2012

Clinicals/Skills lab:
 Fundamentals skills - 72 hrs
 Fundamentals clinical - 45 hrs
 MSI skills - 36 hrs
 MSI clinicals - 279 hrs

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23 <i>Orientation</i> <i>Ms. Faye Silva</i> <i>9-12pm</i>	24 <i>Medical Terminology</i> <i>Dr. Neda</i> <i>8-3pm</i>	25 <i>Success in Nursing!</i> <i>Ms. Gloria Boehm-Yu</i> <i>8-12pm</i>	26 <i>Math for Nurses</i> <i>Mr. Randal Rehling</i> <i>8-3pm</i>	27 <i>CPR class</i> <i>10am</i>	28
29	30 <i>Fundamentals Theory</i> <i>Ms. Carpiz / 8-3pm</i> <i>(start)</i>	31 <i>Communications</i> <i>Mr. Sanchez / 8-3pm</i> <i>(start)</i>				



Exhibit 6B

ATI Testing Policy and Procedures

ATI is an on-line testing support designed as a curriculum and a collaborative skill-building enhancement tool in critical thinking application, and an evaluation tool for student progress in learning. The program itself is designed to teach you study methods and nursing content supplementation in regards to the NCLEX, starting now- as opposed to a month or two before the actual test. With auditory/visual mentoring and coaching- ATI is designed to help you master: comprehension, analysis, and application of nursing knowledge. This program is deemed by the school as one of the better study tools for NCLEX preparation.

You have tutorials, books, and online practice tests- USE THESE TOOLS. Navigate through the website (www.ATItesting.com) once you have created your student account. Focus on Nurse Logic and the Learning System, for these will allow you to do well on practice and proctored tests.

ATI and NCP College of Nursing LVN program guidelines:

1. Students create an account in www.atitesting.com.
2. As soon as the account is set up, NCP will provide the following;
 - For Tutorials - Tutorial ID/Access Key
Tutorial Password/Access Cod
 - For Online Practice Assessment - Assessment ID
Assessment Password
3. Tutorials and practice assessment access is available as soon as assignments are given from respective course instructors.
4. Before the end of all quizzes, each instructor will require practice test completion scores, for proper credit (see grading).
5. On or before the end of each course, a proctored assessment will be scheduled. It will be scheduled and done in the computer lab.
6. If the student fails the proctored assessment test, he/she is given a chance to remediate right away and retake it once for free.

GRADING

7. Practice test due date to be assigned by each instructor.
8. Practice tests all need to be at 90% or better when turned in to the course instructor.
9. Practice tests are to be considered a "quiz," and part of the course grade.
10. Proctored tests are 10% of the academic grade. The goal is to obtain a Level 2 or better.
 - a. The student has to score a "level 2" or better on the first attempt to earn the full 10%.
 - b. The student has a second attempt to obtain a "level 2" after remediation:
 - i. If the student obtains a "level 2", he / she earns 8%.
 - ii. If the student obtains a "level 1", he / she earns 6%.
 - iii. If the student obtains a "below Level 1", he / she earns 4%.

- c. The student has the option to go for the third attempt for a nominal fee after remediation:
 - i. If the student obtains a "level 2", he / she earns 6%
 - ii. If the student obtains a "Level 1", he / she earns 4%
 - iii. If the student obtains a "below level 1", he / she earns 2%
- 11. If the remediation scores continue to be "below level 1," after 3 attempts, the student will be meeting with the Program Director
- 12. All proctored tests and remediation testing are to be completed within 1 week from the course finals for timely completion and submission of grades.

PRACTICE TESTS occur during:

LEVEL 1

- Fundamentals A and B practice tests to be done in Fundamentals of Nursing
- Pharmacology A and B practice tests to be done in Pharmacology

LEVEL 2

- Medical Surgical practice test A to be done in Medical Surgical 1
- Mental Health A and B practice tests to be done in Medical/Surgical 2
- Medical Surgical practice test B to be done in Medical/Surgical 2

LEVEL 3

- Maternal Newborn A and B practice tests to be done in Maternal/Child Nursing
- Nursing Care of Children A and B practice tests to be done in Pediatric Nursing
- Management practice test A and B to be done in Leadership and Supervision

The practice tests are topic specific and cover the majority of the courses taken in the program. Each test item provides a rationale for each right or wrong answer. These tests can be taken unlimited number of times by the students and are done online.

PROCTORED TESTS occur during:

• **LEVEL 1**

- Critical Thinking Entrance Test scheduled on the first 2 weeks of Fundamentals to compare it with Critical Thinking Exit test at the end of the program.
- Fundamentals
- Pharmacology

• **LEVEL 2**

- Mental Health in M/S II
- Medical Surgical in M/S II

• **LEVEL 3**

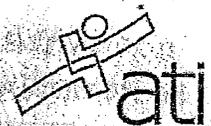
- Maternal Newborn in Intro to Maternal Child Nursing
- Nursing Care of Children in Intro to Pediatric Nursing
- Management in Leadership and Supervision

These tests are taken on campus and are supervised by a faculty or an NCP authorized personnel after classes or after clinical. **The Comprehensive Predictor and the Critical Thinking Exit tests are scheduled before or after graduation. These tests are the final academic requirements to be completed prior to the exit interview. The student can retake it once for free but the third retake is for a nominal fee paid to ATI.**

1. **Comprehensive Predictor Exit Test** need to be at or above the mean national score.
2. **Critical Thinking Exit Test** need to be at or above the mean national score or show progression from the first take.

Individual Performance Profile

Health Occupations Basic Entrance Test V Form A



Individual Name:	[REDACTED]	Adjusted Individual Total Score:	76.7%
Student ID:			
Institution:	NCP CON Hayward AH		
Program Type:	Allied Health		
Test Date:	7/21/2011		
# of Questions:	150		
Attempt:	1 of 1		
Days since last attempt:	0		

Scores

Sub-Scale	Adjusted Individual Score	Adjusted Individual Score (% correct)												
		1	10	20	30	40	50	60	70	80	90	100		
HOBET Reading - (42 Items)	81.0%											▲		
Paragraph and Passage Comprehension	84.2%												▲	
Informational Source Comprehension	82.6%												▲	
HOBET Mathematics - (30 Items)	86.7%													▲
Numbers and Operations	89.5%													▲
Algebraic Applications	100.0%													▲
Data Interpretation	33.3%				▲									
Measurement	75.0%												▲	
HOBET Science - (48 Items)	66.7%												▲	
Human Body Science	72.7%												▲	
Life Science	66.7%												▲	
Earth and Physical Science	85.7%													▲
Scientific Reasoning	75.0%												▲	
HOBET English and Language Usage - (30 Items)	76.7%													▲
Grammar and Word Meanings in Context	73.3%													▲
Spelling and Punctuation	100.0%													▲
Structure	66.7%												▲	

Topics To Review

HOBET Reading (42 items)

Paragraph and Passage Comprehension (19 items)

Analyze and evaluate the use of text structure. (HOBET V Study Manual Page 22 and 23)

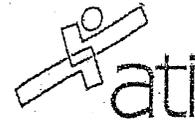
Identify the author's position and purpose. (HOBET V Study Manual Page 14 and 15)

Identify the logical conclusion. (HOBET V Study Manual Page 12)

Informational Source Comprehension (23 items)

Follow a given set of directions. (HOBET V Study Manual Page 24 and 25)

Individual Performance Profile
Health Occupations Basic Entrance Test V Form A



Individual Name:	[REDACTED]	Adjusted Individual Total Score:	74.0%
Student ID:	[REDACTED]		
Institution:	NCP CON Hayward AH		
Program Type:	Allied Health		
Test Date:	4/10/2012		
# of Questions:	150		
Attempt:	1 of 1		
Days since last attempt:	0		

Scores

Sub-Scale	Adjusted Individual Score	Adjusted Individual Score (% correct)										
		1	10	20	30	40	50	60	70	80	90	100
HOBET Reading - (42 Items)	88.1%										▲	
Paragraph and Passage Comprehension	84.7%											▲
Informational Source Comprehension	82.6%										▲	
HOBET Mathematics - (30 Items)	86.7%										▲	
Numbers and Operations	78.9%										▲	
Algebraic Applications	75.0%										▲	
Data Interpretation	100.0%											▲
Measurement	100.0%											▲
HOBET Science - (48 Items)	54.2%											
Human Body Science	45.5%											
Life Science	66.7%											
Earth and Physical Science	57.1%											
Scientific Reasoning	87.5%											▲
HOBET English and Language Usage - (30 Items)	80.0%											▲
Grammar and Word Meanings In Context	80.0%											▲
Spelling and Punctuation	88.9%											▲
Structure	83.3%											▲

Topics To Review

HOBET Reading (42 items)

Paragraph and Passage Comprehension (19 items)

Identify the characteristics of different passage types. (HOBET V Study Manual Page 7 and 8)

Informational Source Comprehension (23 items)

Follow a given set of directions. (HOBET V Study Manual Page 24 and 25)

Follow a given set of directions. (HOBET V Study Manual Page 24 and 25)

Identify the appropriate source for locating information. (HOBET V Study Manual Page 36)

Group Performance Profile

PN Comprehensive Predictor 2011 Form B



Assessment #:	4251955	Adjusted Group Score:	70.3%
Institution:	NCP CON Hayward PN	% of Group Meeting	
Program Type:	PN	Institution Benchmark:	70.8%
Group Size:	24		
Test Date:	12/12/2012		
# of Questions:	150		

Group Performance Summary Table

Predicted Probability of Passing the NCLEX-PN®	Number of Students at Probability of Passing	PN Comprehensive Predictor 2011 Form B Individual Score
99%	3	80.0% - 100.0%
98%	1	77.3% - 79.3%
97%	2	75.3% - 76.7%
96%	3	73.3% - 74.7%
94% - 95%	1	71.3% - 72.7%
91% - 93%	6	68.7% - 70.7%
88% - 90%	1	66.7% - 68.0%
84% - 86%	1	64.7% - 66.0%
80% - 82%	1	63.3% - 64.0%
74% - 78%	3	61.3% - 62.7%
57% - 72%	1	56.7% - 60.7%
1% - 54%	1	0.0% - 56.0%

Individual Mean-National	67.1%
% of Group Above Individual Mean-National	70.8%

Group Performance in the Major Content Areas

Sub-Scale	# Items	Group Score
Coordinated Care	24	76.4%
Safety and Infection Control	21	75.2%
Health Promotion and Maintenance	15	69.2%
Psychosocial Integrity	15	61.1%
Basic Care and Comfort	18	70.1%
Pharmacological and Parenteral Therapies	21	68.8%
Reduction of Risk Potential	18	67.4%
Physiological Adaptation	18	69.7%

Medication Administration	5	70.0%	
Reduction of Risk Potential	18	67.4%	
Changes/Abnormalities in Vital Signs	1	37.5%	▲
Diagnostic Tests	1	45.8%	▲
Laboratory Values	4	65.6%	▲
Potential for Alterations in Body Systems	6	82.6%	▲
Potential for Complications of Diagnostic Tests/Treatments/Procedures	3	59.7%	▲
Potential for Complications from Surgical Procedures and Health Alterations	2	66.7%	▲
Therapeutic Procedures	1	58.3%	▲
Physiological Adaptation	18	69.7%	▲
Alterations in Body Systems	6	68.1%	▲
Basic Pathophysiology	5	75.0%	▲
Fluid and Electrolyte Imbalances	2	60.4%	▲
Medical Emergencies	3	75.0%	▲
Radiation Therapy	1	58.3%	▲
Unexpected Response to Therapies	1	66.7%	▲

Topics To Review

	% of students answering the Item Correctly
Coordinated Care (24 items)	
Advance Directives (1 item)	
Client advocacy, Advance Directives, and Informed Consent: Purpose of Living Wills	79.2%
Advocacy (2 items)	
Ethics and Values: Client Advocacy	54.2%
Client Advocacy, Advance Directives, and Informed Consent: Obtaining Consent When the Client Does Not Speak English	87.5%
Client Care Assignments (2 items)	
Assigning, Delegating and Supervising Client Care: Appropriate Delegation to Assistive Personnel	54.2%
Delegating: Assigning Task to Assistive Personnel	95.8%
Collaboration with Interdisciplinary Team (3 items)	
Coordinating Client Care: Discharging a Client	41.7%
Collaboration with Interdisciplinary Team: Coordination of Care	70.8%
Spinal Cord Injury: Client Referral	95.8%
Concepts of Management and Supervision (2 items)	
Assigning, Delegating, and Supervising Client Care: Appropriate Assignment for Float Nurse	33.3%
Assigning, Delegating, and Supervising Client Care: Supervising Assistive Personnel	100.0%
Continuity of Care (2 items)	
Prioritizing Client Care: Discharge Planning for Home Diabetes Mellitus Management	33.3%
Continuity of Care, Case Management, and Discharge Planning: Discharging a Client Diagnosed with Diabetes Mellitus	66.7%
Establishing Priorities (1 item)	
Urinary Tract Infection: Findings Associated with Urosepsis	79.2%
Ethical Practice (1 item)	
Ethical Responsibilities: Client Understanding of Organ Donation	100.0%
Legal Responsibilities (5 items)	
Legal Responsibilities: Recognizing Scope of Practice	54.2%
Bacterial, Viral, and Fungal Infections: Nationally Notifiable Infectious Diseases	75.0%
Legal Responsibilities: Securing Client Valuables	91.7%
Injury Prevention, Security Plans, and Reporting Incidents: Unsafe Care	100.0%
Legal Responsibilities: Physical Abuse	100.0%
Performance Improvement/Quality Improvement (1 item)	
Performance Improvement: Outcome Indicator	95.8%
Referral Process (3 items)	
Female Cancers: Appropriate Referrals	62.5%
Client Advocacy: Managing Treatment Costs	91.7%
Cerebrovascular Accident: Appropriate Referral	95.8%
Resource Management (1 item)	
Managing Client Care: Cost-Effectiveness	75.0%
Safety and Infection Control (21 items)	
Accident/Error/Injury Prevention (2 items)	
Cognitive Disorders: Planning Care in an Adult Day Care Setting	50.0%
Health Promotion and the Infant (Birth to 1 Year): Crib Safety	83.3%
Emergency Response Plan (2 items)	
Disaster Planning and Emergency Management: Recommending Clients for Discharge	20.8%
Disaster Planning and Emergency Management: Responding to Fire	100.0%

Topics To Review

	% of students answering the Item Correctly
Ergonomic Principles (1 item)	
Ergonomic Principles: Providing Assistance	62.5%
Handling Hazardous and Infectious Materials (2 items)	
Handling Hazardous Materials: Intracavity Radiation Therapy	62.5%
Handling Infectious Materials: MRSA	83.3%
Home Safety (1 item)	
Home Safety: Evaluating Client Understanding of Home Safety	91.7%
Reporting of Incident/Event/Irregular Occurrence/Variance (2 items)	
Incident Reports: Identifying the Need for Occurrence Reporting	66.7%
Reporting Incidents: Appropriate Procedure	83.3%
Restraints and Safety Devices (2 items)	
Client Safety: Applying Wrist Restraints	87.5%
Legal and Ethical Issues in Mental Health Nursing: Appropriate Use of Seclusion	95.8%
Safe Use of Equipment (2 items)	
Oxygen Therapy: Monitoring Delivery	54.2%
Oxygen Therapy: Home Safety	87.5%
Standard Precautions/Transmission-Based Precautions/Surgical Asepsis (7 items)	
Common Respiratory Illnesses: Period of Contagion	45.8%
Communicable Diseases: Management of Varicella	66.7%
Tuberculosis: Transmission Precautions	70.8%
Medical and Surgical Asepsis: Hand Hygiene	75.0%
Cancers: Caring for Clients Who are Immunocompromised	91.7%
Infection Control: Appropriate Application Standard Precautions	100.0%
Infection Control: Transmission Precautions	100.0%
Health Promotion and Maintenance (15 items)	
Ante/Intra/Postpartum and Newborn Care (4 items)	
Nursing Care of the Newborn: Cord Care	45.8%
Meeting the Nutritional Needs of Newborns: Breastfeeding	54.2%
Nursing Care of the Newborn: Breastfeeding	79.2%
Nursing Care of the Newborn: Reinforcing Teaching About Breastfeeding	87.5%
Data Collection Techniques (2 items)	
Hyperbilirubinemia: Phototherapy	66.7%
Legal Responsibilities: Appropriate Documentation	100.0%
Developmental Stages and Transitions (3 items)	
Health Promotion and the Toddler: Age-Appropriate Activities	79.2%
Amputation: Body Image Change	87.5%
Health Promotion of the Infant (Birth to 1 Year): Developmental Milestones	87.5%
Health Promotion/Disease Prevention (3 items)	
Breasts: Self-Examination	50.0%
Childhood Immunizations: Contraindications	66.7%
Health Promotion and the Adolescent (12 to 20 Years): Testicular Examination	83.3%
Lifestyle Choices (2 items)	
Contraception: Appropriate Methods for an Adolescent	33.3%
Contraception: Appropriate Use of Contraception	54.2%
Self Care (1 item)	

Topics To Review

	% of students answering the Item Correctly
Older Adult (over 65 years): Activities of Daily Living	62.5%
Psychosocial Integrity (15 items)	
Behavioral Management (4 items)	
Eating Disorders: Behavioral Management	33.3%
Personality Disorders: Discharge Teaching	41.7%
Anger Management: Priority Interventions	62.5%
Eating Disorders: Anorexia Nervosa	70.8%
Coping Mechanisms (1 item)	
Client Education: Identifying Client Needs	87.5%
Crisis Intervention (3 items)	
Anxiety Disorders: Panic Attack	41.7%
Crisis Management: Acute Anxiety	87.5%
Suicide: Priority Actions	91.7%
Cultural Awareness (2 items)	
Cultural Awareness: Food and Nutrition: Dietary Restrictions	45.8%
Effective Communication: Sensitivity in Communication	70.8%
End of Life Concepts (1 item)	
Care of Those Who are Dying and/or Grieving: Reinforcing Family Teaching	37.5%
Mental Health Concepts (4 items)	
Understanding Anxiety and Defense Mechanisms: Borderline Personality Disorder	29.2%
Bipolar Disorders: Recognizing Manifestations	58.3%
Cognitive Disorders: Recognizing Behaviors	79.2%
Depression: Planning Care	79.2%
Basic Care and Comfort (18 items)	
Assistive Devices (1 item)	
Oxygen Therapy: Use of CPAP Machine	75.0%
Elimination (4 items)	
Benign Prostatic Hypertrophy: Post Operative Care	20.8%
Bowel Elimination Needs: Evaluating Client Teaching on Constipation	62.5%
Urinary Elimination: Assisting a Client to Use a Bedpan	91.7%
Urinary Incontinence: Preventing Skin Breakdown	91.7%
Mobility/Immobility (3 items)	
Promoting Venous Return: Appropriate Actions to Decrease Swelling of Lower Extremities	50.0%
Immobilizing Interventions: Casts, Splints, and Traction: Buck's Traction	62.5%
Musculoskeletal Congenital Disorders: Congenital Clubfoot, Dysplasia of the Hip, Scoliosis: Pavlik Harness	62.5%
Non-Pharmacological Comfort Interventions (5 items)	
Pain Management: Nonpharmacological Pain Management	37.5%
Respiratory Cancers: Managing Chemotherapy-Related Mucositis	58.3%
Fractures: Therapeutic Management of an Injury	70.8%
Complementary and Alternative Therapies: Reinforcing Client Teaching about Music Therapy	95.8%
Complementary Alternative Therapies: Non-pharmacological Interventions	100.0%
Nutrition and Oral Hydration (3 items)	
Sources of Nutrition: Low-Potassium Diet	70.8%
Cerebrovascular Accident: Assisting with Meals	75.0%
Sources of Nutrition: Wound Healing	87.5%

Topics To Review

	% of students answering the Item Correctly
Rest and Sleep (2 items)	
Heart Failure: Planning Care	70.8%
Cognitive Disorders: Interventions to Promote Sleep	79.2%
Pharmacological and Parenteral Therapies (21 items)	
Adverse Effects/Contraindications/Side Effects/Interactions (9 items)	
Endocrine Disorders: Side Effects	12.5%
Medications Affecting Blood Pressure: Spironolactone (Aldactone)	45.8%
Mycobacterial, Fungal, and Parasitic Infections: Medication Interactions with Metronidazole	45.8%
Progesterones: Adverse Effects	62.5%
Anticoagulants: Reinforcing Client Teaching	75.0%
Heparin: Adverse Effects	79.2%
Iron Preparations: Side Effects	79.2%
Opioid Agonists: Preventing Side Effects	91.7%
Beta2-Adrenergic Agonists: Helping the Client Understand Therapy	100.0%
Dosage Calculation (4 items)	
Common Respiratory Illnesses: Pneumonia	33.3%
Dosage Calculation: IV Flow Rate	87.5%
Basic Dosage Calculation: IM Medication Administration	91.7%
Dosage Calculation: Powdered Dosages	95.8%
Expected Actions/Outcomes (3 items)	
Endocrine Disorders: Levothyroxine (Synthroid)	37.5%
Nursing Care of the Newborn: Administration of Vitamin K	70.8%
Cardiac Glycosides: Client Teaching About Digoxin (Lanoxin)	87.5%
Medication Administration (5 items)	
Insulin: Mixing Insulin	33.3%
Medications Affecting Coagulation: Coumadin (Warfarin)	50.0%
Basic Principles of Medication Administration: Appropriate Positioning	79.2%
Angina: Nitroglycerin (Nitro-Dur)	87.5%
Safe Medication Administration and Error Reduction: Appropriate Site for IM Injection	100.0%
Reduction of Risk Potential (18 items)	
Changes/Abnormalities in Vital Signs (1 item)	
Blood Pressure: Abnormal Vital Signs	37.5%
Diagnostic Tests (1 item)	
Renal Diagnostic Procedures: Intravenous Pyelogram (IVP)	45.8%
Laboratory Values (4 items)	
Hypertension: Creatinine Clearance Test	33.3%
Electrolyte Imbalances: Reporting Abnormal Findings	58.3%
Normal Physiologic Changes in Pregnancy: Laboratory Values	83.3%
Acid-Base Imbalances: Interpreting Laboratory Results	87.5%
Potential for Alterations in Body Systems (6 items)	
Complications of Pregnancy: Hyperemesis Gravidarum	75.0%
Prenatal Care: Supine Hypotension	75.0%
Complications of Pregnancy: Identifying Manifestations of Placenta Previa	79.2%
Diabetes Management: Evaluating Client Response to Foot Care Teaching	79.2%
Vascular Access: Care for AV Shunt	91.7%

Topics To Review

	% of students answering the Item Correctly
Immobilizing Interventions: Casts, Splints, and Traction: Data Collection	95.8%
Potential for Complications of Diagnostic Tests/Treatments/Procedures (3 items)	
Electroconvulsive Therapy: Reinforcing Teaching	50.0%
Mechanical Ventilation: Planning Care	54.2%
Musculoskeletal Congenital Disorders: Skin Care	75.0%
Potential for Complications from Surgical Procedures and Health Alterations (2 items)	
Amputations: Discharge Teaching	41.7%
Systemic Lupus Erythematosus: Hygiene	91.7%
Therapeutic Procedures (1 item)	
Urinary Elimination Needs and Specimen Collection: Catheterization for Residual Urine	58.3%
Physiological Adaptation (18 items)	
Alterations in Body Systems (6 items)	
Chest Tube Monitoring: Reporting Complications	33.3%
Temperature: Reducing Fever	50.0%
Diabetes Management: Hypoglycemia	75.0%
Urinary Tract Infection: Reinforcing Teaching	79.2%
Head Injury: Interventions for Increased Intracranial Pressure	83.3%
Meningitis: Expected Findings	87.5%
Basic Pathophysiology (5 items)	
Peripheral Arterial Disease: Monitoring Circulation	70.8%
Respiratory Cancers: Identifying Manifestations	70.8%
Heart Failure: Recognizing Manifestations	75.0%
Peripheral Vascular Disease: Data Collection	75.0%
Cystic Fibrosis: Expected Findings	83.3%
Fluid and Electrolyte Imbalances (2 items)	
Electrolyte Imbalances: Hypocalcemia	50.0%
Fluid Imbalances: Identifying Fluid Volume Deficit	70.8%
Medical Emergencies (3 items)	
Pulmonary Embolism: Appropriate Nursing Interventions	45.8%
Asthma: Emergency Management of Bee Sting Allergy	87.5%
Wound Evisceration: Emergency Management	91.7%
Radiation Therapy (1 item)	
Cancer and Oncological Emergencies: Client Teaching about Radiation	58.3%
Unexpected Response to Therapies (1 item)	
Angiography: Priority Intervention for Postoperative Bleeding	66.7%

Outcomes

Thinking Skills	No of Items	Group Score	Description
Clinical Judgment/Critical Thinking PN 2011	108	69.2%	Ability to use critical thinking skills (interpretation, analysis, evaluation, inference, and explanation) to make a clinical judgment regarding a posed clinical problem. Includes cognitive abilities of application and analysis.
Foundational Thinking in Nursing PN 2011	42	73.1%	Ability to recall and comprehend information and concepts foundational to quality nursing practice.

Priority Setting in Nursing	No of Items	Group Score	Description
	22	65.5%	Ability to demonstrate nursing judgment in making decisions about priority responses to a client problem. Also includes establishing priorities regarding the sequence of care to be provided to multiple clients.

Nursing Process	No of Items	Group Score	Description
Data Collection (PN 2011)	29	69.0%	Ability to apply nursing knowledge to the systematic collection of data about the client's present health status in order to identify the client's needs and to identify appropriate assessments to be performed based on client findings. Also includes ability to ask the client appropriate questions, listen carefully to the client's responses, and respond appropriately. Nurses must continuously use appropriate methods to safely collect comprehensive client data.
Planning (PN 2011)	16	69.8%	Ability to participate in the development of an appropriate plan of care for clients with specific health alterations or needs for health promotion/maintenance. Includes the ability to contribute to the establishment of priorities and desired outcomes of care that can be readily measured and evaluated.
Implementation/Therapeutic Nursing Intervention (PN 2011)	78	69.9%	Ability to use clinical judgment and critical thinking to select and implement appropriate therapeutic interventions based on nursing knowledge, priorities of care, and planned goals or outcomes in order to promote, maintain, or restore a client's health. Also includes the ability to appropriately respond to an unplanned event (e.g., observation of unsafe practice, change in client status) and to routinely take measures to minimize a client's risk.
Evaluation (PN 2011)	27	73.1%	Ability to evaluate a client's response to nursing interventions and to reach a nursing judgment regarding the extent to which goals and outcomes have been met. Also includes the ability to assess client/staff understanding of instruction, the effectiveness of intervention, and the recognition of a need for further intervention.

Clinical Topics	No of Items	Group Score	Description
Adult Medical Surgical Nursing PN 2011	59	68.1%	Ability to apply medical-surgical nursing knowledge to clinical problems experienced by adults. Topics include care of clients with cardiovascular, hematologic, gastrointestinal, neurosensory, endocrine, fluid and electrolyte, integumentary, lymph/immune/infectious, renal and urinary, musculoskeletal, reproductive, and respiratory disorders as well as topics relevant to perioperative nursing care.
Nursing Care of Children PN 2011	16	72.7%	Ability to apply nursing knowledge to clinical problems experienced by children. Topics include basic concepts (e.g., medication administration, physical assessment, nutritional needs), care of children with various system disorders, care of children experiencing pediatric emergencies (e.g., accidental poisoning, respiratory arrest), and care of children with psychosocial disorders.
Maternal Newborn Nursing PN 2011	13	62.8%	Ability to apply nursing knowledge to perinatal nursing care. Topics include antepartum, intrapartum, and postpartum nursing care as well as care of the newborn.
Mental Health Nursing PN 2011	18	64.4%	Ability to apply nursing knowledge to the care of clients with mental health disorders. Topics include foundational mental health concepts (e.g., therapeutic communication, therapeutic milieu, legal/ethical issues), care of clients experiencing psychobiologic disorders, and care of clients receiving traditional nonpharmacological and psychopharmacological therapies.



Score Explanation and Interpretation

Group Performance Profile

Group Score:

This score is determined by adding all of the individual scores from the group and dividing the sum by the number of individuals in the group. This group score describes how, on average, the students within the group performed on the assessment (or within a designated sub scale).

$$\frac{\text{Sum of Individual Scores Within the Group}}{\text{Number of Individuals in the Group}}$$

= Group Score

For example:

$$\frac{40.7\% + 53.2\% + 69.4\% + 70.8\% + 82.1\%}{5 \text{ Individuals in the Group}}$$

= 63.2%

Group scores can be interpreted through "criterion-referenced" or "norm-referenced" measures. Criterion-referenced measures are best used to determine if an established standard has been met (e.g., % of students achieving a particular score or probability of passing). Norm-referenced measures can be useful for comparing performance to other students or groups.

NA: Data not available.

Pretest Items: There are 30 unscored pretest questions throughout the assessment, and 150 scored questions. The pretest questions are used for research purposes.

Topics to Review: Based on the questions missed on this assessment, a listing of content areas and topics to review is provided. A variety of learning resources may be used in the review process, including content, images, animations and videos in select components of ATI's Content Mastery Series® Review Modules, and online practice assessments.

Please consider Virtual-ATI NCLEX® Review: an online, post-graduation, NCLEX review guided by a virtual coach – a master's-prepared nurse educator – who will let you know with greater than 97 percent accuracy when you are ready to test and pass NCLEX. For more information on Virtual-ATI NCLEX Review, as well as other post-graduation NCLEX prep products, visit the ATI website at <https://www.atitesting.com/Solutions/PostGraduation.aspx>

% of Group Meeting Institution Benchmark:

Institutions have the option to set their own benchmarks. If your institution has not set a benchmark for the assessment this score report field will be "NA".

Criterion-Referenced Measure – Probability of Passing NCLEX-PN®:

The following expectancy table was developed by comparing PN Comprehensive Predictor® 2011 individual scores to NCLEX-PN® performance for a sample of PN students. As can be seen from the table, higher Predictor scores tend to indicate a higher probability of passing the NCLEX-PN®. However, students should use caution when interpreting the table because numerous factors can influence performance on both the Predictor and the NCLEX-PN®. The expectancy table pertains only to individual scores and not to group scores.

For example, note that a student with a score of 68.0% correct would be expected to have a 90% chance of passing the NCLEX-PN® on the first attempt. Although this is a high probability of success, it is not a guarantee. For every 100 students with this score, 90 are predicted to pass and 10 are predicted to fail.

PN Comprehensive Predictor® 2011 Expectancy Table.

PN Comprehensive Predictor® 2011 Individual Score	Predicted Probability of Passing the NCLEX-PN®
80.0% - 100.0%	99%
77.3% - 79.3%	98%
75.3% - 76.7%	97%
73.3% - 74.7%	96%
71.3% - 72.7%	94% - 95%
68.7% - 70.7%	91% - 93%
66.7% - 68.0%	88% - 90%
64.7% - 66.0%	84% - 86%
63.3% - 64.0%	80% - 82%
61.3% - 62.7%	74% - 78%
56.7% - 60.7%	57% - 72%
0.0% - 56.0%	1% - 54%

Norm-Referenced Measures:

Means and percentile ranks can be useful for comparing performance to other PN nursing students or groups. These means and percentile ranks are initially set on a volunteer norming sample. They are reviewed annually, and may be periodically reset as more students take the assessments.

Mean - National:

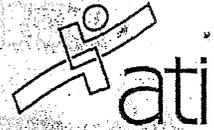
The group mean - national is the average of all PN group scores (within a specified sample from the ATI data pool) for this assessment. The individual mean - national is based on all PN student scores in the sample.

Percentile Rank - National:

The national percentile rank refers to the proportion of groups from all PN nursing programs (within a specified sample from the ATI data pool) whose scores are the same as or lower than your group score.

Group Performance Profile

PN Comprehensive Predictor 2011 Form A Web



Assessment #:	4252086	Adjusted Group Score:	71.2%
Institution:	NCP CON Hayward PN	% of Group Meeting	
Program Type:	PN	Institution Benchmark:	100.0%
Group Size:	4		
Test Date:	1/10/2013		
# of Questions:	150		

Group Performance Summary Table

Predicted Probability of Passing the NCLEX-PN®	Number of Students at Probability of Passing	PN Comprehensive Predictor 2011 Form A Web Individual Score
99%	0	80.0% - 100.0%
98%	0	77.3% - 79.3%
97%	1	75.3% - 76.7%
96%	1	73.3% - 74.7%
94% - 95%	0	71.3% - 72.7%
91% - 93%	0	68.7% - 70.7%
88% - 90%	2	66.7% - 68.0%
84% - 86%	0	64.7% - 66.0%
80% - 82%	0	63.3% - 64.0%
74% - 78%	0	61.3% - 62.7%
57% - 72%	0	56.7% - 60.7%
1% - 54%	0	0.0% - 56.0%

Individual Mean-National	67.1%
% of Group Above Individual Mean-National	75.0%

Group Performance in the Major Content Areas

Sub-Scale	# Items	Group Score
Coordinated Care	24	76.0%
Safety and Infection Control	21	82.1%
Health Promotion and Maintenance	15	63.3%
Psychosocial Integrity	15	71.7%
Basic Care and Comfort	18	68.1%
Pharmacological and Parenteral Therapies	21	59.5%
Reduction of Risk Potential	18	73.6%
Physiological Adaptation	18	72.2%

Group Scores

Sub-Scale	# Items	Group Score	Group Score (% correct)											
			1	10	20	30	40	50	60	70	80	90	100	
Coordinated Care	24	76.0%										▲		
Advance Directives	1	100.0%												▲
Advocacy	2	87.5%											▲	
Client Care Assignments	2	62.5%									▲			
Client Rights	1	100.0%												▲
Collaboration with Interdisciplinary Team	1	25.0%			▲									
Concepts of Management and Supervision	2	75.0%										▲		
Confidentiality/Information Security	1	75.0%										▲		
Continuity of Care	2	50.0%								▲				
Establishing Priorities	2	100.0%												▲
Ethical Practice	1	100.0%												▲
Informed Consent	2	100.0%												▲
Legal Responsibilities	5	75.0%										▲		
Referral Process	1	0.0%	▲											
Resource Management	1	100.0%												▲
Safety and Infection Control	21	82.1%											▲	
Accident/Error/Injury Prevention	4	75.0%										▲		
Emergency Response Plan	1	100.0%												▲
Ergonomic Principles	1	100.0%												▲
Handling Hazardous and Infectious Materials	1	100.0%												▲
Home Safety	2	100.0%												▲
Reporting of Incident/Event/Irregular Occurrence/Variance	1	100.0%												▲
Restraints and Safety Devices	2	87.5%											▲	
Safe Use of Equipment	1	100.0%												▲
Standard Precautions/Transmission-Based Precautions/Surgical Asepsis	8	68.8%										▲		
Health Promotion and Maintenance	15	63.3%										▲		
Ante/Intra/Postpartum and Newborn Care	4	50.0%								▲				
Developmental Stages and Transitions	2	100.0%												▲
Health Promotion/Disease Prevention	5	70.0%										▲		
High Risk Behaviors	1	50.0%								▲				
Lifestyle Choices	3	50.0%								▲				
Psychosocial Integrity	15	71.7%										▲		
Abuse/Neglect	1	50.0%								▲				
Behavioral Management	1	75.0%										▲		
Chemical and Other Dependencies	2	62.5%									▲			
Crisis Intervention	1	100.0%												▲
Cultural Awareness	1	75.0%										▲		
End of Life Concepts	1	100.0%												▲
Mental Health Concepts	6	62.5%									▲			
Sensory/Perceptual Alterations	1	75.0%										▲		
Therapeutic Environment	1	100.0%												▲
Basic Care and Comfort	18	68.1%										▲		
Assistive Devices	1	75.0%										▲		
Elimination	2	100.0%												▲
Mobility/Immobility	3	41.7%							▲					
Non-Pharmacological Comfort Interventions	7	67.9%										▲		
Nutrition and Oral Hydration	3	83.3%											▲	
Personal Hygiene	2	50.0%								▲				
Pharmacological and Parenteral Therapies	21	59.5%									▲			

Adverse Effects/Contraindications/Side Effects/Interactions	6	41.7%	▲
Dosage Calculation	4	68.8%	▲
Expected Actions/Outcomes	6	62.5%	▲
Medication Administration	5	70.0%	▲
Reduction of Risk Potential	18	73.6%	▲
Changes/Abnormalities in Vital Signs	1	100.0%	▲
Diagnostic Tests	5	70.0%	▲
Laboratory Values	2	100.0%	▲
Potential for Alterations in Body Systems	8	65.6%	▲
Potential for Complications of Diagnostic Tests/Treatments/Procedures	1	50.0%	▲
Potential for Complications from Surgical Procedures and Health Alterations	1	100.0%	▲
Physiological Adaptation	18	72.2%	▲
Alterations in Body Systems	5	85.0%	▲
Basic Pathophysiology	5	70.0%	▲
Fluid and Electrolyte Imbalances	3	66.7%	▲
Medical Emergencies	3	83.3%	▲
Radiation Therapy	1	25.0%	▲
Unexpected Response to Therapies	1	50.0%	▲

PRELIMINARY

Topics To Review

	% of students answering the Item Correctly
Coordinated Care (24 items)	
Advance Directives (1 item)	
Advance Directives: Nursing Responsibilities	100.0%
Advocacy (2 items)	
Client Advocacy: Choosing Treatment Options	75.0%
Grief, Loss and Palliative Care: Responding to Client Concerns	100.0%
Client Care Assignments (2 items)	
Delegating Client Care: AP Assignment	50.0%
Assigning, Delegating and Supervising Client Care: Appropriate Delegation to Assistive Personnel	75.0%
Client Rights (1 item)	
Client Rights: Refusal of Treatment	100.0%
Collaboration with Interdisciplinary Team (1 item)	
Coordinating Client Care: Discharging a Client	25.0%
Concepts of Management and Supervision (2 items)	
Assigning, Delegating, and Supervising Client Care: Appropriate Assignment for Float Nurse	50.0%
Assigning, Delegating, and Supervising Client Care: Supervising Assistive Personnel	100.0%
Confidentiality/Information Security (1 item)	
Confidentiality: Family Member Request for Information	75.0%
Continuity of Care (2 items)	
Continuity of Care: Shift Report on Multiple Clients	25.0%
Continuity of Care, Case Management, and Discharge Planning: Discharging a Client Diagnosed with Diabetes Mellitus	75.0%
Establishing Priorities (2 items)	
Chronic Obstructive Pulmonary Disease (COPD): Prioritizing Client Care	100.0%
Prioritizing Client Care: Priority Data Collection following Report	100.0%
Ethical Practice (1 item)	
Ethical Responsibilities: Client Understanding of Organ Donation	100.0%
Informed Consent (2 items)	
Informed Consent: Nursing Responsibility	100.0%
Legal Responsibilities: Appropriate Process for Informed Consent	100.0%
Legal Responsibilities (5 items)	
Legal Responsibilities: Impaired Staff	50.0%
Coordinating Client Care: Incorrect Medication Administration	75.0%
Legal Responsibilities: Securing Client Valuables	75.0%
Supervising Client Care: Identifying Need for Intervention	75.0%
Legal Responsibilities: Recognizing Malpractice	100.0%
Referral Process (1 item)	
Referrals: Need for Diabetes Mellitus Education	0.0%
Resource Management (1 item)	
Managing Client Care: Cost-Effectiveness	100.0%
Safety and Infection Control (21 items)	
Accident/Error/Injury Prevention (4 items)	
Creating and Maintaining a Therapeutic and Safe Environment: Suicide Precautions	50.0%
Discharge Teaching: Car Seat Safety	75.0%
Health Promotion and the Infant (Birth to 1 Year): Crib Safety	75.0%
Health Promotion and the Infant: Car Seat Safety	100.0%

Topics To Review

	% of students answering the Item Correctly
Emergency Response Plan (1 item)	
Disaster Planning and Emergency Management: Fire Response	100.0%
Ergonomic Principles (1 item)	
Ergonomic Principles: Providing Assistance	100.0%
Handling Hazardous and Infectious Materials (1 item)	
Safe Medication Administration: Needle Disposal	100.0%
Home Safety (2 items)	
Health Promotion and the Toddler: Reinforcing Parent Teaching about Safety	100.0%
Home Safety: Evaluating Client Understanding of Home Safety	100.0%
Reporting of Incident/Event/Irregular Occurrence/Variance (1 item)	
Reporting Incidents: Client Situations	100.0%
Restraints and Safety Devices (2 items)	
Legal and Ethical Issues in Mental Health Nursing: Appropriate Use of Seclusion	75.0%
Legal and Ethical Issues in Mental Health Nursing: Restraints	100.0%
Safe Use of Equipment (1 item)	
Vital Signs: Ensuring Accuracy	100.0%
Standard Precautions/Transmission-Based Precautions/Surgical Asepsis (8 items)	
Infection Control: Preventing Transmission of Hepatitis B	25.0%
Common Respiratory Illnesses: Period of Contagion	50.0%
Medical and Surgical Asepsis: Preventing Transmission of Staphylococcal Infection	50.0%
Tuberculosis: Nursing Interventions	50.0%
Communicable Diseases: Preventing Transmission of Varicella	75.0%
Infection Control: Transmission Precautions	100.0%
Medical and Surgical Asepsis: Appropriate Application Standard Precautions	100.0%
Skin Infections and Infestations: Pediculosis Transmission	100.0%
Health Promotion and Maintenance (15 items)	
Ante/Intra/Postpartum and Newborn Care (4 items)	
Nursing Care of the Newborn: Breastfeeding	25.0%
Nursing Care of the Newborn: Cord Care	25.0%
Nursing Care of the Client in Stages of Labor: Further Evaluation	75.0%
Nutritional Needs of the Newborn: Breast Milk	75.0%
Developmental Stages and Transitions (2 items)	
Health Promotion and the Preschooler (3 to 5 Years): Psychosocial Development	100.0%
Health Promotion of the Infant (Birth to 1 Year): Developmental Milestones	100.0%
Health Promotion/Disease Prevention (5 items)	
Immunizations: Monitoring Adherence with Immunization Schedule	25.0%
Nutrition and Pregnancy: Folate	50.0%
Health Promotion and the Adolescent (12 to 20 Years): Testicular Examination	75.0%
Female Cancers: Screening Recommendations	100.0%
Immunizations: School-Age Child	100.0%
High Risk Behaviors (1 item)	
Health Promotion and the Adolescent (12 to 20 years): Age-Appropriate Education about Smoking	50.0%
Lifestyle Choices (3 items)	
Contraception: Contraindications to Oral Contraceptives	0.0%
Contraception: Educational Needs	50.0%

Topics To Review

	% of students answering the Item Correctly
Myocardial Infarction: Reinforcing Lifestyle Changes	100.0%
Psychosocial Integrity (15 items)	
Abuse/Neglect (1 item)	
Family Violence: Reinforcing Teaching	50.0%
Behavioral Management (1 item)	
Anxiety Disorders: Behavioral Interventions	75.0%
Chemical and Other Dependencies (2 items)	
Substance-Related and Nonsubstance-Related Dependencies: Smoking Cessation	25.0%
Substance-Related Dependencies: Treatment of Alcohol Withdrawal	100.0%
Crisis Intervention (1 item)	
Crisis Management: Acute Anxiety	100.0%
Cultural Awareness (1 item)	
Effective Communication: Sensitivity in Communication	75.0%
End of Life Concepts (1 item)	
Effective Communication in Mental Health Nursing: Therapeutic Communication	100.0%
Mental Health Concepts (6 items)	
Understanding Anxiety and Defense Mechanisms: Borderline Personality Disorder	0.0%
Bipolar Disorders: Recognizing Manifestations	75.0%
Cognitive Disorders: Recognizing Behaviors	75.0%
Defense Mechanisms: Suppression	75.0%
Eating Disorders: Anorexia Nervosa	75.0%
Understanding Anxiety and Defense Mechanisms: Client Response	75.0%
Sensory/Perceptual Alterations (1 item)	
Schizophrenia: Identifying Needs of the Client with Hallucinations	75.0%
Therapeutic Environment (1 item)	
Cognitive Disorders: Recovering from Delirium	100.0%
Basic Care and Comfort (18 items)	
Assistive Devices (1 item)	
Oxygen Therapy: Use of CPAP Machine	75.0%
Elimination (2 items)	
Elimination: Application of Condom Catheters	100.0%
Urinary Elimination Needs and Specimen Collection: Preventive Care for Clients at Risk	100.0%
Mobility/Immobility (3 items)	
Joint Replacements: Appropriate Action Following Knee Arthroplasty	0.0%
Musculoskeletal Congenital Disorders: Congenital Clubfoot, Dysplasia of the Hip, Scoliosis: Pavlik Harness	50.0%
Immobilizing Interventions: Planning Care for Skeletal Traction	75.0%
Non-Pharmacological Comfort Interventions (7 items)	
Fractures: Therapeutic Management of an Injury	25.0%
Pain Management: Nonpharmacological Pain Management	25.0%
Pain Management: Interventions for Back Pain	50.0%
Care of Those Who are Dying and/or Grieving: Interventions Consistent with Goals	75.0%
Circumcision: Evaluating Pain	100.0%
Complementary Alternative Therapies: Non-pharmacological Interventions	100.0%
Respiratory Cancers: Managing Chemotherapy-Related Mucositis	100.0%
Nutrition and Oral Hydration (3 items)	

Topics To Review

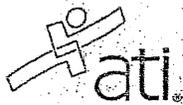
	% of Students answering the Item Correctly
Gastric Surgery and Dumping Syndrome: Reinforcing Dietary Teaching	75.0%
Renal Failure: Dietary Management	75.0%
Cultural Awareness: Food and Nutrition: Vegan Diet	100.0%
Personal Hygiene (2 items)	
Hygiene Care: Oral Care for Client with Decreased Level of Consciousness	25.0%
Hygiene Care: Planning Routine Care	75.0%
Pharmacological and Parenteral Therapies (21 items)	
Adverse Effects/Contraindications/Side Effects/Interactions (6 items)	
Endocrine Disorders: Side Effects	0.0%
Antilipemics: Side Effects of Atorvastatin (Lipitor)	25.0%
High Ceiling Loop Diuretics: Monitoring for Adverse Effects	50.0%
Medications to Treat Mood Disorders: Depression: Evaluating Client Teaching	50.0%
Opioid Agonists: Hydromorphone (Dilaudid)	50.0%
Progesterones: Adverse Effects	75.0%
Dosage Calculation (4 items)	
Common Respiratory Illnesses: Pneumonia	25.0%
Basic Dosage Calculation: Number of Tablets to Administer	75.0%
Dosage Calculation: Liquid Dosages	75.0%
Dosage Calculation: IV Flow Rate	100.0%
Expected Actions/Outcomes (6 items)	
Decongestants: Identifying Appropriate Medication	50.0%
High Ceiling Loop Diuretics: Symptoms of Fluid Overload	50.0%
Iron Preparations: Oral Iron Administration	50.0%
Medications to Treat Mood Disorders: Reinforcing Client Teaching about Lithium	50.0%
Endocrine Disorders: Levothyroxine (Synthroid)	75.0%
Cardiac Glycosides: Client Teaching About Digoxin (Lanoxin)	100.0%
Medication Administration (5 items)	
Anticoagulants: Route of Administration	50.0%
Blood Transfusions: Monitoring for Adverse Reactions	50.0%
Organic Nitrates: Nitroglycerin (Nitro-Dur)	75.0%
Safe Medication Administration and Error Prevention: Administration Skills	75.0%
Insulin: Mixing Insulin	100.0%
Reduction of Risk Potential (18 items)	
Changes/Abnormalities in Vital Signs (1 item)	
Blood Pressure: Orthostatic Hypotension	100.0%
Diagnostic Tests (5 items)	
Client Education: Promoting Adherence	50.0%
Dysrhythmias: Procedure for Obtaining a 12-Lead ECG	50.0%
Antepartum Diagnostic Interventions: Client Understanding of an Amniocentesis	75.0%
Respirations and Pulse Oximetry: Nursing Interventions	75.0%
Arterial Blood Gases: Client Teaching	100.0%
Laboratory Values (2 items)	
Acid-Base Imbalances: Interpreting Laboratory Results	100.0%
Normal Physiologic Changes in Pregnancy: Laboratory Values	100.0%
Potential for Alterations in Body Systems (8 items)	

Topics To Review

	% of students answering the Item Correctly
Cerebrovascular Accident: Identifying Manifestations	25.0%
Complications of Pregnancy: Signs of Preeclampsia	50.0%
Diabetes Management: Foot Care	50.0%
Prenatal Care: Supine Hypotension	50.0%
Complications of Pregnancy: Hyperemesis Gravidarum	75.0%
Head Injury: Data Collection Findings	75.0%
Complications of Pregnancy: Identifying Manifestations of Placenta Previa	100.0%
Immobilizing Interventions: Casts, Splints, and Traction: Data Collection	100.0%
Potential for Complications of Diagnostic Tests/Treatments/Procedures (1 item)	
Electroconvulsive Therapy: Reinforcing Teaching	50.0%
Potential for Complications from Surgical Procedures and Health Alterations (1 item)	
Tonsillectomy: Signs of Hemorrhage	100.0%
Physiological Adaptation (18 items)	
Alterations in Body Systems (5 items)	
Diabetes Management: Hypoglycemia	75.0%
Head Injury: Expected Findings	75.0%
Wound Management: Vacuum-Assisted Closure	75.0%
Client Safety: Prioritizing Interventions During a Seizure	100.0%
Meningitis: Expected Findings	100.0%
Basic Pathophysiology (5 items)	
COPD: Client Teaching on Pathophysiology	50.0%
Cystic Fibrosis: Expected Findings	75.0%
Heart Failure: Recognizing Manifestations	75.0%
Peripheral Arterial Disease: Monitoring Circulation	75.0%
Respiratory Cancers: Identifying Manifestations	75.0%
Fluid and Electrolyte Imbalances (3 items)	
Fluid and Electrolyte Imbalances: Manifestations of Hypocalcemia	50.0%
Fluid Imbalances: Recognizing Signs and Symptoms	50.0%
Fluid Imbalances: Identifying Fluid Volume Deficit	100.0%
Medical Emergencies (3 items)	
Pulmonary Embolism: Appropriate Nursing Interventions	75.0%
Sensory Disorders - Visual and Hearing Impairments: Managing Eye Injuries	75.0%
Wound Dehiscence/Evisceration: Immediate Care	100.0%
Radiation Therapy (1 item)	
Cancer: Client Teaching on Radiation Therapy	25.0%
Unexpected Response to Therapies (1 item)	
Vascular Access: Signs of IV Infiltration	50.0%

Outcomes

Thinking Skills	No of Items	Group Score	Description
Clinical Judgment/Critical Thinking PN 2011	100	73.8%	Ability to use critical thinking skills (interpretation, analysis, evaluation, inference, and explanation) to make a clinical judgment regarding a posed clinical problem. Includes cognitive abilities of application and analysis.
Foundational Thinking in Nursing PN 2011	50	66.0%	Ability to recall and comprehend information and concepts foundational to quality nursing practice.
Priority Setting in Nursing	No of Items	Group Score	Description
	19	68.4%	Ability to demonstrate nursing judgment in making decisions about priority responses to a client problem. Also includes establishing priorities regarding the sequence of care to be provided to multiple clients.
Nursing Process	No of Items	Group Score	Description
Data Collection (PN 2011)	38	71.1%	Ability to apply nursing knowledge to the systematic collection of data about the client's present health status in order to identify the client's needs and to identify appropriate assessments to be performed based on client findings. Also includes ability to ask the client appropriate questions, listen carefully to the client's responses, and respond appropriately. Nurses must continuously use appropriate methods to safely collect comprehensive client data.
Planning (PN 2011)	15	68.3%	Ability to participate in the development of an appropriate plan of care for clients with specific health alterations or needs for health promotion/maintenance. Includes the ability to contribute to the establishment of priorities and desired outcomes of care that can be readily measured and evaluated.
Implementation/Therapeutic Nursing Intervention (PN 2011)	71	72.9%	Ability to use clinical judgment and critical thinking to select and implement appropriate therapeutic interventions based on nursing knowledge, priorities of care, and planned goals or outcomes in order to promote, maintain, or restore a client's health. Also includes the ability to appropriately respond to an unplanned event (e.g., observation of unsafe practice, change in client status) and to routinely take measures to minimize a client's risk.
Evaluation (PN 2011)	26	74.0%	Ability to evaluate a client's response to nursing interventions and to reach a nursing judgment regarding the extent to which goals and outcomes have been met. Also includes the ability to assess client/staff understanding of instruction, the effectiveness of intervention, and the recognition of a need for further intervention.
Clinical Topics	No of Items	Group Score	Description
Adult Medical Surgical Nursing PN 2011	46	66.8%	Ability to apply medical/surgical nursing knowledge to clinical problems experienced by adults. Topics include care of clients with cardiovascular, hematologic, gastrointestinal, neurosensory, endocrine, fluid and electrolyte, integumentary, lymph/immune/infectious, renal and urinary, musculoskeletal, reproductive, and respiratory disorders, as well as topics relevant to perioperative nursing care.
Nursing Care of Children PN 2011	22	73.9%	Ability to apply nursing knowledge to clinical problems experienced by children. Topics include basic concepts (e.g., medication administration, physical assessment, nutritional needs); care of children with various system disorders; care of children experiencing pediatric emergencies (e.g., accidental poisoning, respiratory arrest); and care of children with psychosocial disorders.
Maternal Newborn Nursing PN 2011	18	59.7%	Ability to apply nursing knowledge to perinatal nursing care. Topics include antepartum, intrapartum, and postpartum nursing care as well as care of the newborn.
Mental Health Nursing PN 2011	22	69.3%	Ability to apply nursing knowledge to the care of clients with mental health disorders. Topics include foundational mental health concepts (e.g., therapeutic communication, therapeutic milieu, legal/ethical issues), care of clients experiencing psychobiologic disorders, and care of clients receiving traditional nonpharmacological and psychopharmacological therapies.



Score Explanation and Interpretation

Group Performance Profile

Group Score:

This score is determined by adding all of the individual scores from the group and dividing the sum by the number of individuals in the group. This group score describes how, on average, the students within the group performed on the assessment (or within a designated sub scale).

$$\frac{\text{Sum of Individual Scores Within the Group}}{\text{Number of Individuals in the Group}}$$

= Group Score

For example:

$$\frac{40.7\% + 53.2\% + 69.4\% + 70.8\% + 82.1\%}{5 \text{ Individuals in the Group}} = 63.2\%$$

Group scores can be interpreted through "criterion-referenced" or "norm-referenced" measures. Criterion-referenced measures are best used to determine if an established standard has been met (e.g., % of students achieving a particular score or probability of passing). Norm-referenced measures can be useful for comparing performance to other students or groups.

NA: Data not available.

Pretest Items: There are 30 un-scored pretest questions throughout the assessment, and 150 scored questions. The pretest questions are used for research purposes.

Topics to Review: Based on the questions missed on this assessment, a listing of content areas and topics to review is provided. A variety of learning resources may be used in the review process, including content, images, animations and videos in select components of ATI's Content Mastery Series® Review Modules, and online practice assessments.

Please consider Virtual-ATI NCLEX® Review: an online, post-graduation, NCLEX review guided by a virtual coach – a master's-prepared nurse educator – who will let you know with greater than 97 percent accuracy when you are ready to test and pass NCLEX. For more information on Virtual-ATI NCLEX Review, as well as other post-graduation NCLEX prep products, visit the ATI website at <https://www.atitesting.com/Solutions/PostGraduation.aspx>

% of Group Meeting Institution Benchmark:

Institutions have the option to set their own benchmarks. If your institution has not set a benchmark for the assessment this score report field will be "NA".

Criterion-Referenced Measure – Probability of Passing NCLEX-PN®:

The following expectancy table was developed by comparing PN Comprehensive Predictor® 2011 individual scores to NCLEX-PN® performance for a sample of PN students. As can be seen from the table, higher Predictor scores tend to indicate a higher probability of passing the NCLEX-PN®. However, students should use caution when interpreting the table because numerous factors can influence performance on both the Predictor and the NCLEX-PN®. The expectancy table pertains only to individual scores and not to group scores.

For example, note that a student with a score of 68.0% correct would be expected to have a 90% chance of passing the NCLEX-PN® on the first attempt. Although this is a high probability of success, it is not a guarantee. For every 100 students with this score, 90 are predicted to pass and 10 are predicted to fail.

PN Comprehensive Predictor® 2011 Expectancy Table.

PN Comprehensive Predictor® 2011 Individual Score	Predicted Probability of Passing the NCLEX-PN®
80.0% - 100.0%	99%
77.3% - 79.3%	98%
75.3% - 76.7%	97%
73.3% - 74.7%	96%
71.3% - 72.7%	94% - 95%
68.7% - 70.7%	91% - 93%
66.7% - 68.0%	88% - 90%
64.7% - 66.0%	84% - 86%
63.3% - 64.0%	80% - 82%
61.3% - 62.7%	74% - 78%
56.7% - 60.7%	57% - 72%
0.0% - 56.0%	1% - 54%

Norm-Referenced Measures:

Means and percentile ranks can be useful for comparing performance to other PN nursing students or groups. These means and percentile ranks are initially set on a volunteer norming sample. They are reviewed annually, and may be periodically reset as more students take the assessments.

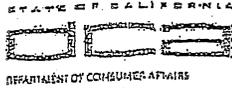
Mean - National:

The group mean - national is the average of all PN group scores (within a specified sample from the ATI data pool) for this assessment. The individual mean - national is based on all PN student scores in the sample.

Percentile Rank - National:

The national percentile rank refers to the proportion of groups from all PN nursing programs (within a specified sample from the ATI data pool) whose scores are the same as or lower than your group score.

Exhibit 6D



STATE AND CONSUMER SERVICES AGENCY - GOVERNOR EDMUND G. BROWN JR.
BOARD OF VOCATIONAL NURSING & PSYCHIATRIC TECHNICIANS
 2535 Capitol Oaks Drive, Suite 205, Sacramento, CA 95833-2945
 Phone (916) 263-7800 Fax (916) 263-7866 Web www.bvnot.ca.gov



edee
 BVNPT Received
 on 9-14-11 with KR

FACULTY APPROVAL APPLICATION

SUBMIT FORM IN DUPLICATE PRIOR TO DATE OF APPOINTMENT. This information is required under Business and Professions Code, Division 2. All information requested is mandatory. Failure to provide this information will result in the application being rejected as incomplete. Submit a separate form for faculty members teaching in both the Vocational Nurse (VN) and Psychiatric Technician (PT) Programs (if applicable).

Date Approved: <u>9/20/11</u>
Approved By: <u>[Signature]</u>
Section: <u>2529(c)(2)</u>

PRINT OR TYPE (DO NOT USE PENCIL)

1. NAME OF SCHOOL <u>HAYWARD</u> <u>NCP COLLEGE OF NURSING</u>	2. TYPE OF PROGRAM: <input checked="" type="checkbox"/> VN Program <input type="checkbox"/> PT Program			
3. NAME OF FACULTY APPLICANT: <u>JACOCHICO</u> <u>ROLANDO M. JACOCHICO JR</u>	4. POSITION TITLE: <input type="checkbox"/> Director <input type="checkbox"/> Instructor <input type="checkbox"/> Teacher Asst. <input checked="" type="checkbox"/> Asst. Director <input type="checkbox"/> Additional Faculty			
5. EMPLOYMENT STATUS: <input checked="" type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time	6. TEACHING ASSIGNMENT: <input type="checkbox"/> Teaching "Theory" Content Only <input type="checkbox"/> Teaching "Clinical" Content Only <input checked="" type="checkbox"/> Teaching "Both" Theory/Clinical Content <input type="checkbox"/> Substitute for <input type="checkbox"/> Theory <input type="checkbox"/> Clinical			
7. CALIFORNIA LICENSE NUMBER INFORMATION: <input checked="" type="checkbox"/> RN License#: <u>676865</u> <input type="checkbox"/> LVN License#: _____ <input type="checkbox"/> PT License#: _____ Expiration Date: <u>6/30/2013</u> Expiration Date: _____ Expiration Date: _____				
8. TEACHING COURSE: <i>For faculty positions which require a teaching course, please submit evidence of completion or current attendance (for instructors only) in a teaching course. A copy of a certificate of completion or transcript from an accredited institution must be submitted. If the course content in teaching is not clear, please submit a copy of the catalog course description.</i>				
9. SUBMIT A COPY OF THE FOLLOWING DOCUMENTS: {See California Code of Regulations (CCR), Sections 2529(c)(3) faculty qualifications (VN Program); Sections 2584 (c)(3) faculty qualifications (PT Program)}. <input checked="" type="checkbox"/> Current, Active California Professional License; <input checked="" type="checkbox"/> Baccalaureate degree from accredited school, university or college (attach school transcript which shows date degree conferred OR copy of college or university diploma); <input checked="" type="checkbox"/> Teaching credential (attach copy) OR <input type="checkbox"/> Check here if applicant meets community college or state university teaching requirements.				
NOTE: Do NOT submit copies of driver's license, social security card, passport or other personal information.				
10. PROFESSIONAL EXPERIENCE: (Add additional sheets if necessary)				
FROM:	TO:	EMPLOYER:	POSITION:	DUTIES:
<u>JULY 2008</u>	<u>PRESENT</u>	<u>NCP COLLEGE OF NURSING</u>	<u>INSTRUCTOR</u>	<u>THEORY AND CLINICAL</u>
<u>JAN 2008</u>	<u>PRESENT</u>	<u>MARSHALL CORRECTIONAL</u>	<u>RN</u>	<u>TRNGE / MED PASS</u>
<u>2006</u>	<u>2008</u>	<u>KAISER REDWOOD CITY</u>	<u>RN</u>	<u>NEURO SURGICAL UNIT</u>
I hereby certify under penalty of perjury under the laws of the State of California that the information contained in this application is true and correct.				
Faculty Applicant's Signature: <u>[Signature]</u>			Date: <u>8/12/11</u>	
Program Director's Signature: <u>[Signature]</u>			Date: <u>8/18/2011</u>	

Rolando M. Jaochico Jr. RN, BSN

Assistant VN Program Director

NCP College of Nursing- Hayward Campus

Tel 510-785-0454 Ext 308

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Email: Rolando.Jaochico@ncpcollegeofnursing.edu

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Fax 650-871-0703

Email: Rolando.Jaochico@ncpcollegeofnursing.edu

Rolando Jaochico

From: Rolando Jaochico
Sent: Thursday, October 18, 2012 5:53 PM
To: [REDACTED]
Subject: RE: Benchmark 3

Hello Sir,

You garnered a 70% on your benchmark 3, it is time to schedule for you are ready! Please collaborate with Nicole and email her so you can schedule it. Make sure that you answer as much question as possible leading up to this examination. You are READY!

Rolando M. Jaochico Jr. RN, BSN
VN Program Director
South San Francisco

NCP College of Nursing- South San Francisco Campus
Tel 650-871-0701 Ext 110
Fax 650-871-0703
Email: Rolando.Jaochico@ncpcollegeofnursing.edu

NCP College of Nursing- Hayward Campus
Tel 510-785-0454 Ext 308
Fax 510-785-4165
Email: Rolando.Jaochico@ncpcollegeofnursing.edu

From: [REDACTED]
Sent: Monday, October 08, 2012 2:42 PM
To: Rolando Jaochico
Subject: Re: Benchmark 3

Yes, that works. I plan to take the benchmark on Wednesday this week, October 10, and then I'm going to be on campus next Friday the 19th to go over where I stand with taking the NCLEX.

Kindest regards, [REDACTED]

On Oct 7, 2012, at 10:48 AM, "Rolando Jaochico" <Rolando.Jaochico@ncpcollegeofnursing.edu> wrote:

Hello my friend,

Please make sure that you take the third benchmark, I know I still owe you the last one but this one is important, with this we can gauge where you are and we can collaborate on a plan so that you will be taking it as soon as possible. This collaboration will be with me, Nicole and definitely you! Is this feasible?

Rolando M. Jaochico Jr. RN, BSN
Assistant VN Program Director

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Tel 650-871-0701 Ext 110
Fax 650-871-0703
Email: Rolando.Jaochico@ncpcollegeofnursing.edu

From: [REDACTED]
Sent: Saturday, October 06, 2012 3:28 PM
To: Rolando Jaochico
Subject: Re: Benchmark 3

Hey boss; I received my eligibility letter today.

Kindest regards [REDACTED]

On Oct 3, 2012, at 3:28 PM, "Rolando Jaochico" <Rolando.Jaochico@ncpcollegeofnursing.edu> wrote:

Hello nurses,

By this time, some of you have received their eligibility from the boards, for those who have not, they will be coming soon. Please notify us through a phone call or email that indeed you have received the eligibility so we can assist you on the next phase. At the same time, your third benchmark will be available for you to take starting Monday next week. Per your student success contract, this will be available for you until Friday and the last test taker must start no later than six PM. I still have left out benchmark 2 and will be giving you the evaluations and scores to you within this week. I apologize for this as I have been in both campuses secondary to the re-alignment that we are doing in school. This third benchmark will give us a gauge on where you are and the probability of passing the exam. This can also give us a chance to collaborate with each other and to re-focus the studying on what the essential elements are still lacking in your preparation for the exam. Please avail of it! The exam is with Katie already. Also, open your NCSBN site now (if you have not done so yet), the NCSBN is the governing body that makes your exam and they will be the closest to what type of questions you will be getting in the exam.

Lastly, I would like to congratulate all of you on the work that you have been putting into all of this. The school is definitely very proud of you. Please give me a call or e-mail me for whatever questions you have. I am also available for any questions or clarifications you might have about concepts or topics. Just e-mail me and I will get back to you ASAP. God bless all of you!

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Rolando Jaochico

From: Rolando Jaochico
Sent: Thursday, October 18, 2012 5:52 PM
To: [REDACTED]
Subject: RE: hft19

Hello [REDACTED]

You are ready, please email Nicole of your schedule so we have it on file. Continue answering as much question as you can, as long you are getting those marks, you will be fine. In the third benchmark, you got 70%, very good because this is a harder exam.

Rolando M. Jaochico Jr. RN, BSN
VN Program Director
South San Francisco

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Fax 510-785-4165
Email: Rolando.Jaochico@ncpcollegeofnursing.edu

From: [REDACTED]
Sent: Friday, October 12, 2012 7:08 PM
To: Rolando Jaochico
Subject: hft19

Hi Mr. Jaochico,
This is Cindy from HFT19. I will have my NCLEX on the 26th of this month, two weeks from now. I would like to know where should I focus now on studying. I'm done with my NCSBN questions and i was getting 80 and 85 percent.
Thanks and Godbless,
[REDACTED]

Rolando Jaochico

From: Rolando Jaochico
Sent: Sunday, October 07, 2012 10:48 AM
To: [REDACTED]
Subject: RE: Benchmark 3

Hello my friend,

Please make sure that you take the third benchmark, I know I still owe you the last one but this one is important, with this we can gauge where you are and we can collaborate on a plan so that you will be taking it as soon as possible. This collaboration will be with me, Nicole and definitely you! Is this feasible?

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Fax 650-871-0703
Email: Rolando.Jaochico@ncpcollegeofnursing.edu

From: [REDACTED]
Sent: Saturday, October 06, 2012 3:28 PM
To: Rolando Jaochico
Subject: Re: Benchmark 3

Hey boss, I received my eligibility letter today.

Kindest regards, [REDACTED]

On Oct 3, 2012, at 3:28 PM, "Rolando Jaochico" <Rolando.Jaochico@ncpcollegeofnursing.edu> wrote:

Hello nurses,

By this time, some of you have received their eligibility from the boards, for those who have not, they will be coming soon. Please notify us through a phone call or email that indeed you have received the eligibility so we can assist you on the next phase. At the same time, your third benchmark will be available for you to take starting Monday next week. Per your student success contract, this will be available for you until Friday and the last test taker must start no later than six PM. I still have left out benchmark 2 and will be giving you the evaluations and scores to you within this week. I apologize for this as I have been in both campuses secondary to the re-alignment that we are doing in school. This third benchmark will give us a gauge on where you are and the probability of passing the exam. This can also give us a chance to collaborate with each other and to re-focus the studying on what the essential elements are still lacking in your preparation for the exam. Please avail of it! The exam is with Katie

already. Also, open your NCSBN site now (if you have not done so yet), the NCSBN is the governing body that makes your exam and they will be the closest to what type of questions you will be getting in the exam.

Lastly, I would like to congratulate all of you on the work that you have been putting into all of this. The school is definitely very proud of you. Please give me a call or e-mail me for whatever questions you have. I am also available for any questions or clarifications you might have about concepts or topics. Just e-mail me and I will get back to you ASAP. God bless all of you!

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Rolando Jaochico

From: Rolando Jaochico
Sent: Friday, September 21, 2012 7:59 AM
To: [REDACTED]
Cc: Nicole McKinney; Faye Silva (Faye.Silva@ncpcollegeofnursing.edu)
Subject: Benchmark 2

Hello [REDACTED]

Your second benchmark score is 61.65%, good job. Study hard and if you have not opened your NCSBN, do so already. This will definitely increase your score to the 70's and 80's increasing probability of passing the first time. Please e-mail us when you receive your eligibility already from the boards.

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Assistant VN Program Director

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Fax 650-871-0703
Email: Rolando.Jaochico@ncpcollegeofnursing.edu

Rolando Jaochico

From: Rolando Jaochico
Sent: Friday, September 21, 2012 7:58 AM
To: [REDACTED]
Cc: Nicole McKinney; Faye Silva (Faye.Silva@ncpcollegeofnursing.edu)
Subject: Benchmark 2

Hello [REDACTED]

Your second benchmark score is 67.66%, good job. Study hard and if you have not opened your NCSBN, do so already. This will definitely increase your score to the 70's and 80's increasing probability of passing the first time. Please e-mail us when you receive your eligibility already from the boards.

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Assistant VN Program Director

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Fax 650-871-0703
Email: Rolando.Jaochico@ncpcollegeofnursing.edu

Rolando Jaochico

From: Rolando Jaochico
Sent: Monday, August 13, 2012 12:02 PM
To: [REDACTED]
Subject: FW: Benchmark results

Rolando M. Jaochico Jr. RN, BSN
Assistant VN Program Director

NCP College of Nursing- Hayward Campus
Tel 510-785-0454 Ext 308
Fax 510-785-4165
Email: Rolando.Jaochico@ncpcollegeofnursing.edu

NCP College of Nursing- South San Francisco Campus
Tel 650-871-0701 Ext 110
Fax 650-871-0703
Email: Rolando.Jaochico@ncpcollegeofnursing.edu

From: Rolando Jaochico
Sent: Friday, August 03, 2012 11:42 AM
To: [REDACTED]
Cc: Nicole McKinney; Faye Silva
Subject: Benchmark results

Dear [REDACTED]

Based on your benchmark exam, you scored 53.80%. Good start! The topics that you have scored the lowest or below passing standards are:

1. endocrine
2. cardio
3. respiratory
4. renal
5. skin
6. neuro

The topics that you are above passing standards are:

1. Cancer care
2. musculoskeletal
3. Emergency care
4. leadership and delegation

As we begin our discussions on the different topics, one thing to consider is getting into a routine. You will find that the hardest is only in the beginning and as you maintain this set schedule, I guarantee you, it will be much easier. Be sure also, that you expose yourself to at least 100 questions on the topic that you have studied already. I suggest you do this at the end of a topic that you have reviewed. This will allow you to gauge yourself on the knowledge and expertise on that topic and give you the rationale if ever you got it wrong. Remember, it has to be 100! I will see you next Friday for our first session and rest assured that your school is behind you in this final endeavor.

Day 1:

9-12pm: Review NCP Student Handbook/Catalog – presented by Ms. Faye and Katie

- Student Handbook and Catalog will be reviewed by Milo – 11/5
- Final version to be ready by 11/26
- PD Committee will then meet again to review the main areas of this document to be covered
- Copies will be made for each faculty member and important sections will be flagged

12-1pm : LUNCH

1-2:30pm: Review of Employee Handbook – payroll, timesheets and Management Survey findings

2:30-2:45pm: BREAK

2:45-4pm: Life of an NCP Student. Admission process, HOBET testing and NCLEX info.

Day 2:

9-10:30am: ATI Training with Elisabeth Turingan, ATI – confirmed by Maria

10:30-10:45: BREAK

10:45-12pm: Break instructors in to groups:

- a. Preface day with BVNPT requirements of hours and approval of any curriculum changes
- b. Discussion of practice vs. protocol
- c. Clinical, Theory and Skills Lab (rotate)
- d. Align syllabi and ATI – *this can actually be done by ATI before the PD and then we can just review*

12-1pm: LUNCH

1-2:45pm: Start sharing ideas for protocol for each area (Theory, Clinical and Skills Lab)

2:45-3pm: BREAK

3-4pm: Discussion of communication issues:

- e. Classroom management and how to adjust communication style based upon student need
- f. How to bring up issues with admin/management
- g. Accountability and instructor expectations

Day 3:

9-10am: Present performance ladder and path to FT status –presented by Milo

- a. Faye and Rolando to create based upon: trainings, NCLEX engagement, referrals, faculty meetings, student advisement/issues, office hours.

10-10:15: BREAK

10:15-12pm: Write protocol for each topic area: FUN, MSI, MSII, MCH, PED, L/S (theory, clinical + skills)

12-1pm: LUNCH

1-2:30: Complete protocol for each topic area

2:30-2:45: BREAK

2:45-4pm: Presentation of instructor created protocol



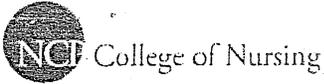
NCP Teaching Protocol for Theory:

- Ongoing student assessment
- Use traditional learning style - active learning
- Give weekly exams
- Give pre and post exam to encourage the students to read before class and be active during lecture
 - Fundamentals focus on critical thinking use multiple choice answer questions essay, fill in the blank and take home exams open book quiz and oral exams
 - Part-Time classes should have 25 questions minimum per exam; 30 min timed; discuss test items after lecture is done - only if time permits
 - Full-Time classes should have 50 questions minimum; 1hr timed; discuss test items after lecture is done - only if time permits
 - Final exams should all be at least 100 questions
 - Never argue with students over test questions - take outside of class 1:1
 - Test banks (Cengage, Evolve, ATI)
 - Use sample books and CD's for alternate nursing texts
- Teaching strategies –
 - Incorporate group activities
 - Project reporting
 - Games
 - Simulation
 - Evaluation throughout the course - adjust based upon feedback classroom command
 - Encourage students to talk more
 - Use humor in lecture
 - Use personal experience
 - Incorporate critical thinking in power points
 - Incorporate NCLEX type questions in power points (why and how questions)
 - Expect students to read chapter(s) before class - provide pre-test
 - Incorporate ATI into teaching and exams
 - Expect students to use APA format when turning in written work (APA format will be introduced in orientation week - including grammar and spell check)
- Collaborate with clinical instructors through email when grades are submitted
 - theory instructor will cc clinical instructors what topics are being discussed that week, test questions and student issues

Make-up work: Give each student who is absent make-up project by the next day. This project is to be submitted by the following week. Unsatisfactory Academic Progress Notification (UAPN) should be given after two failing grades. Student must know their grade each week, students must sign to confirm they understand their grade - provide documentation to office manager at the end of each course with grade submission.

Cell phone use: policy states no cell phones in the classroom

- First time – verbal warning
- Second time – one hour deducted from the attendance for the day (mark on attendance sheet)
- Third time – Ethical Probation by Program Director



NCP Teaching Protocol for Clinical:

Goal: To produce graduates who are proficient as caregivers

*The following is a guideline for the clinical day,
the specific schedule/activities will change for each clinical site*

- Instructors are expected to arrive 15 min prior to the start of the day in order to prepare
- 7-7:15 – Shift report
- 7:15-7:30 - check clinical uniform (according to NCP policy) and prepare for the activities of the day.
 - If the student arrives without full clinical uniform - one warning, second time NP for the day
 - Student may wear temp ID if they forget - only one time
- 7:30-8am – Pre-conference
 - review clinical objectives
 - clinical site and instructor expectations
 - pt. assignment
- 8-11am - on the floor.
 - hand washing
 - review pt. chart
 - make rounds
 - check vitals / assessment
 - ADL's
 - Feeding
 - med pass,
 - take blood sugar
 - nursing notes
 - ALL VN students should be able to do CNA work

Lunch - 1 hr break if no other breaks; 30 min lunch if regular breaks occur in the AM

- Students are not to be left on the floor without the instructor; students may leave the floor for a break without the instructor
- Conduct student head count after lunch and each break

12-1pm - cont. with med pass or treatments

1-3pm – Post-conference

- discuss theory topics
- student reports

Attendance: If a student arrives more than 10 min late - they are absent for the day, instructor must make it clear that they will need to make-up the clinical day have then sign on the tardy sheet if they are more than 10 min late if a student is 11-29 min late = tardy; 30 min late = absence

Cell phone policy: Cell phones are not allowed to be used in the clinical area (not visible at all), only used during breaks and on lunch



NCP College of Nursing

Educate | Grow | Succeed

August 8, 2012

Ms Suellen Clayworth MN, RN
Nursing Education Consultant
Board of Vocational Nursing and Psychiatric Technicians
2535 Capitol Oaks Drive
Sacramento, CA 95833

Dear Ms Clayworth,

NCP College of Nursing Hayward campus is requesting to replace our 2 part time classes with a full time class at the end of the respective programs. The requested full time class will commence on May 20, 2013. If approved, it will allow NCP College of Nursing to offer 3 full time classes in 2013 and hopefully, if your office allows, 3 full time classes per year.

The reason for phasing out the part time classes in this campus is mainly due to the challenges observed in the part time students such as fatigue, lack of focus, and lack of commitment because of work related demands. In addition, there appears to be higher community demand for full time classes because of our recent approval to offer financial aid.

Please let me know what steps I need to take to help facilitate the approval of this process.

Sincerely,

Faye Silva RN, BSN, MPH

Faye Silva, RN, BSN, MPH
Program Director
NCP College of Nursing
South San Francisco campus

Exhibit 6H



FEDERAL STUDENT AID "START HERE. GO FURTHER."

UNITED STATES DEPARTMENT OF EDUCATION

FEDERAL STUDENT AID
SCHOOL ELIGIBILITY CHANNEL

PROGRAM PARTICIPATION AGREEMENT
[PROVISIONAL APPROVAL]

Effective Date of Approval: The date on which this Agreement is signed on behalf of the Secretary of Education

Approval Expiration Date: June 30, 2013

Reapplication Date: March 31, 2013

Name of Institution: NCP College of Nursing
Address of Institution: 257 Longford Drive, Room 5
South San Francisco, CA 94080-1005

OPE ID Number: 04195400

DUNS Number: 132368671

Taxpayer Identification Number (TIN): 942843682

The execution of this Agreement by the Institution and the Secretary is a prerequisite to the Institution's initial or continued participation in any Title IV, HEA Program.

The postsecondary educational institution listed above, referred to hereafter as the "Institution," and the United States Secretary of Education, referred to hereafter as the "Secretary," agree that the Institution may participate in those student financial assistance programs authorized by Title IV of the Higher Education Act of 1965, as amended (Title IV, HEA Programs) indicated under this Agreement and further agrees that such participation is subject to the terms and conditions set forth in this Agreement. As used in this Agreement, the term "Department" refers to the U.S. Department of Education.

SCOPE OF COVERAGE

This Agreement applies to all locations of the Institution as stated on the most current ELIGIBILITY AND CERTIFICATION APPROVAL REPORT issued by the Department. This Agreement covers the Institution's eligibility to participate in each of the following listed Title IV, HEA programs, and incorporates by reference the regulations cited.

- FEDERAL PELL GRANT PROGRAM, 20 U.S.C. §§ 1070a *et seq.*; 34 C.F.R. Part 690.
- FEDERAL FAMILY EDUCATION LOAN PROGRAM, 20 U.S.C. §§ 1071 *et seq.*; 34 C.F.R. Part 682.
- FEDERAL DIRECT STUDENT LOAN PROGRAM, 20 U.S.C. §§ 1087a *et seq.*; 34 C.F.R. Part 685.
- FEDERAL PERKINS LOAN PROGRAM, 20 U.S.C. §§ 1087aa *et seq.*; 34 C.F.R. Part 674.
- FEDERAL SUPPLEMENTAL EDUCATIONAL OPPORTUNITY GRANT PROGRAM, 20 U.S.C. §§ 1070b *et seq.*; 34 C.F.R. Part 676.
- FEDERAL WORK-STUDY PROGRAM, 42 U.S.C. §§ 2751 *et seq.*; 34 C.F.R. Part 675.
- ACADEMIC COMPETITIVENESS GRANT AND NATIONAL SCIENCE AND MATHEMATICS ACCESS TO RETAIN TALENT GRANT PROGRAMS, 20 U.S.C. §§ 1070a-1 *et seq.*; 34 C.F.R. Part 691.
- IRAQ AND AFGHANISTAN SERVICE GRANT, 20 U.S.C. §§ 1070d *et seq.*

PROVISIONAL CERTIFICATION

This provisional certification is granted for a limited period to permit the Institution to participate in the Title IV, HEA programs referenced in this Agreement. During the period of provisional certification, the participation of the Institution will be subject to revocation for cause. Cause for revocation includes, without limitation, a failure to comply with any provision set forth in this Agreement, a violation of Department regulations deemed material by the Department, or a material misrepresentation in the material submitted to the Department as part of the Institution's application process for this certification. The Department in its sole discretion may provide the Institution with an opportunity to cure any such failure, may place the Institution on reimbursement funding pending a decision regarding revocation of this Agreement by a designated Department official, or may suspend the participation of the Institution pending a decision by the Department regarding revocation of this Agreement. In the event the Department chooses to revoke this Agreement and the Institution's participation in the Title IV, HEA programs, the Institution will have the right to show cause why this Agreement should not be revoked by presenting its objections to the designated Department official in writing. The Institution agrees that this opportunity to show cause, and not the procedures in 34 CFR 668 subpart G, shall be the sole administrative appeal regarding such

revocation. The decision by the designated Department official will constitute the final agency action.

Special Requirements for Substantial Changes Made During Term of Provisional Certification

Any institution provisionally certified must apply for and receive approval by the Secretary for expansion or of any substantial change (as hereinafter identified) before it may award, disburse or distribute Title IV, HEA funds based on the substantial change. Substantial changes generally include, but are not limited to: (a) establishment of an additional location; (b) increase in the level of academic offering beyond those listed in the Institution's Eligibility and Certification Approval Report (ECAR); or (c) addition of any nondegree or short-term training program.

If the Institution applies for the Secretary's approval of a substantial change, the Institution must demonstrate that it has the financial and administrative resources necessary to assure the Institution's continued compliance with the standards of financial responsibility (34 CFR 668.15) and administrative capability (34 CFR 668.16).

Reasons and Special Conditions of Provisional Certification

Initial Certification

The Institution is approved for the first time to participate in Title IV, HEA programs, and is granted provisional certification for a period not to exceed one complete award year in which to demonstrate that it satisfies the standards of financial stability and administrative capability.

The institution must comply with Clery/Campus Security Act requirements. The institution is required to develop a policy statement, issue timely warning reports when necessary and keep a crime log if the institution maintains a campus security department.

Fundamentals of Title IV Administration Training Requirement

The institution must fulfill the Fundamentals of Title IV Administration training requirement within 12 months of the effective date of the Program Participation Agreement.

Application for Recertification

Upon completion of the period of provisional certification, if the Institution wishes to apply for recertification to participate in the Title IV, HEA programs, the Institution must submit a completed Application for Approval to Participate in Federal Student Financial Aid Programs, together with all required supporting documentation, no later than March 31, 2013.

Grant or Denial of Full Certification

Notwithstanding any paragraph above, the provisional certification ends upon the Department's notification to the Institution of the Department's decision to grant or deny a six year certification to participate in the Title IV, HEA programs.

GENERAL TERMS AND CONDITIONS

1. The Institution understands and agrees that it is subject to and will comply with the program statutes and implementing regulations for institutional eligibility as set forth in 34 CFR Part 600 and for each Title IV, HEA program in which it participates, as well as the general provisions set forth in Part F and Part G of Title IV of the HEA, and the Student Assistance General Provisions regulations set forth in 34 CFR Part 668.

The recitation of any portion of the statute or regulations in this Agreement does not limit the Institution's obligation to comply with other applicable statutes and regulations.

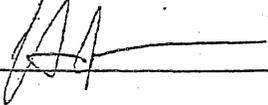
2.
 - a. The Institution certifies that on the date it signs this Agreement, it has a drug abuse prevention program in operation that it has determined is accessible to any officer, employee, or student at the Institution.
 - b. The Institution certifies that on the date it signs this Agreement, it is in compliance with the disclosure requirements of Section 485(f) of the HEA (Campus Security Policy and Campus Crime Statistics).

3. The Institution agrees to comply with --

- a. Title VI of the Civil Rights Act of 1964, as amended, and the implementing regulations, 34 CFR Parts 100 and 101 (barring discrimination on the basis of race, color or national origin);
- b. Title IX of the Education Amendments of 1972 and the implementing regulations, 34 CFR Part 106 (barring discrimination on the basis of sex);
- c. The Family Educational Rights and Privacy Act of 1974 and the implementing regulations, 34 CFR Part 99;
- d. Section 504 of the Rehabilitation Act of 1973 and the implementing regulations, 34 CFR Part 104 (barring discrimination on the basis of physical handicap); and
- e. The Age Discrimination Act of 1975 and the implementing regulations, 34 CFR Part 110.
- f. The Standards for Safeguarding Customer Information, 16 CFR Part 314, issued by the Federal Trade Commission (FTC), as required by the Gramm-Leach-Bliley (GLB) Act, P.L. 106-102. These Standards are intended to ensure the security and confidentiality of customer records and information. The Secretary considers any breach to the security of student records and information as a demonstration of a potential lack of administrative capability as stated in 34 CFR 668.16(c). Institutions are strongly encouraged to inform its students and the Department of any such breaches.

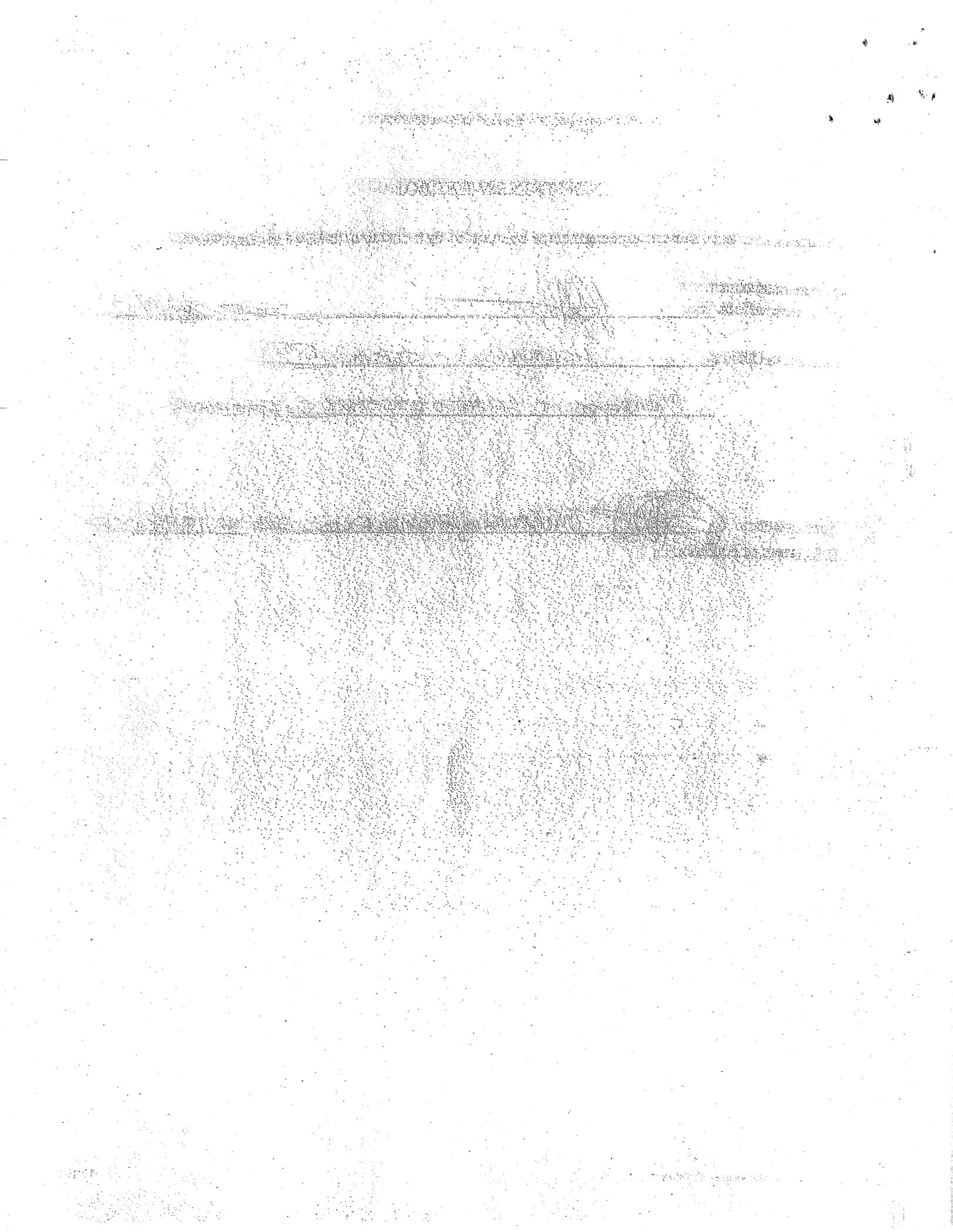
IN WITNESS WHEREOF

the parties hereto have caused this Agreement to be executed by their duly authorized representatives.

Signature of Institution's
Chief Executive Officer:  Date: 2/14/12

Print Name and Title: HERMILO A. JACKSON III
PRESIDENT & CHIEF OPERATING OFFICER

For the Secretary:  MERLANDO ROSARIO, PhD Date: 2/17/2012
U.S. Department of Education





College of Nursing

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SUCCESS CONTRACT FOR HFT20 GRADUATES

NCP believes in the importance of partnership with each graduate towards a mutual goal - the successful completion of the VN Program, the successful passing of the NCLEX license test and ultimately our graduates getting a nursing or nursing-related job reaching all milestones as quickly as possible.

We have compiled best practices from many VN Programs and the culmination of successful practices is contained in the processes of this Contract for Success.

THIS AGREEMENT is made this 2 day of January, year 2013 by and between:

NCP College of Nursing, with principal office address at 257 Longford Drive, South San Francisco, CA with a Branch Campus at 21615 Hesperian Blvd, Hayward, CA and hereinafter referred to as "NCP".

-AND-

[Redacted] a graduate of NCP College of Nursing, with residence address at [Redacted] and hereinafter referred to as the "GRADUATE".

SCHEDULE OF COMMITMENT:

- 1. January 7, 8, 9, 2013: ATI customized NCLEX - PN review
2. January 10, 2013: Complete an ATI online survey
3. January 11, 2013: Complete the 500 + practice questions with ATI
4. January 14, 2013: Start virtual ATI review with personal coach
5. January 19, 2013: Graduation day
6. January 7 - 18, 2013: Exit interviews
7. March 11-22, 2013: Expect the issuance of eligibility to test from BVNPT. Expect "green light" from virtual coach. Activate and start NCSBN online review. Contact student services for assistance in signing up with Pearson Vue for testing dates and location.
7.1. NCLEX-PN testing target April 1 - 12, 2013
7.2. Graduates must provide NCP with a copy of NCLEX-PN results
7.3. Graduates are also required to be responsive to PD and NCP team i.e. returning emails and phone calls.
7.4. Graduates are NOT allowed to reschedule their own tests.

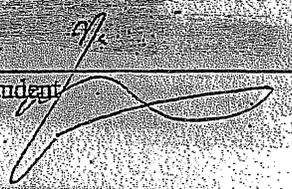
REBATES:

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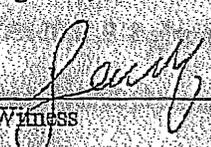

HERMILO A. JOCSON III
President and COO

Signed by NCP
Graduate


Student

1/2/13
Date

Signed by Witness


Witness

1/2/13
Date

Exhibit 61



College of Nursing

Educate | Grow | Succeed

SUCCESS CONTRACT FOR HFT20 GRADUATES

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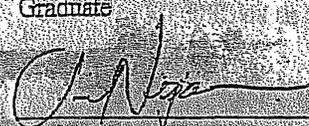
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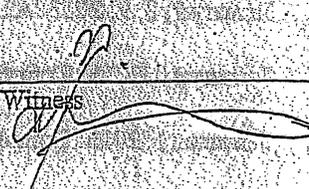

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Student

1/2/13
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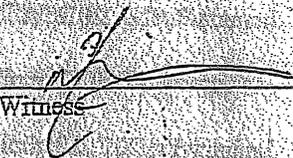

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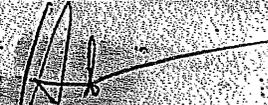
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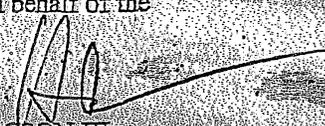
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1/2/13
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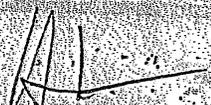
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Student

1/21/2013
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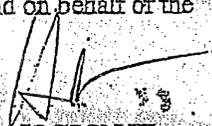
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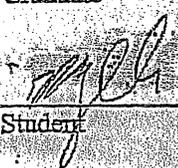
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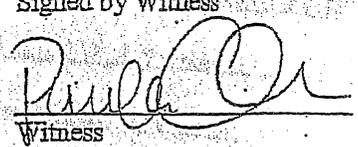
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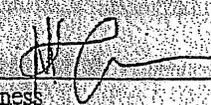
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7.4. Graduates are NOT allowed to reschedule their own tests.

REBATES:

- (A) After scheduled testing date has elapsed, GRADUATES are expected to call or e-mail directly to NCP to advice of pass or no pass. In case of an emergency, graduates must coordinate re-scheduling the exam with student services only. Graduates who have passed the NCLEX-PN exam on their first attempt are eligible to receive a refund of their NCSBN NCLEX-PN Online Review fee in the amount of \$90.
- (B) When GRADUATE employment is confirmed and documented or if GRADUATE enrolls in an advanced training program and is documented, GRADUATE will receive a \$50.00 bonus fee
- (C) Graduates who have taken and passed the NCLEX-PN exam are eligible to receive \$50 OFF when you join our IV Therapy & Blood Withdrawal Certification

Signed for and on behalf of the
Company by

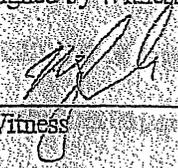

HERMILO A. JOCSON III
President and COO

Signed by NCP
Graduate


Student

1-13
Date

Signed by Witness


Witness

1-2-13
Date