

# Agenda Item #13.A.4.



STATE AND CONSUMER SERVICES AGENCY • GOVERNOR EDMUND G. BROWN JR.  
**BOARD OF VOCATIONAL NURSING & PSYCHIATRIC TECHNICIANS**  
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DATE: April 24, 2013

TO: Board Members

FROM:   
Pam Hinckley, R. N., M.S.N.  
Nursing Education Consultant

SUBJECT: Healthcare College of California Vocational Nursing Program –  
Consideration of Request to Admit Students (Director: Milva Quial, Stockton, San  
Joaquin County, Private)

On September 9, 2011, the Board placed Healthcare College of California Vocational Nursing Program on provisional approval<sup>1</sup> for the two-year period from September 9, 2011, through September 30, 2013 due to low licensure pass rates.

Healthcare College of California Vocational Nursing Program requests approval to admit a class of 20 full - time students on June 17, 2013 graduating on May 15, 2014, to **replace** a class that graduated September 30, 2012.

## History of Prior Board Actions

(See Attachment A, History of Prior Board Actions)

## Enrollment

Currently, the program is approved to offer a full – time course of instruction that is 42 weeks in length. The program requires prior Board approval for the admission of each class. The pattern of admissions for current classes is seen in the enrollment table below.

The following table represents **current and proposed** student enrollment based on class starts and completions. The table indicates a **maximum enrollment of 48 students** for the period **April 2009 through June 2013**.

<sup>1</sup> 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.

ENROLLMENT DATA				
CLASS DATES		#Students Admitted	#Students Current or Completed	Total Enrolled
Start	Complete			
4/09		24 (EO approved 20)	23	23
10/09		25	25	23 + 25 = 48
	2/10 (4/09 Class)		-23	48 - 23 = 25
3/10		28	22	25 + 22 = 47
	8/10 (10/09 Class)		-25	47 - 25 = 22
	12/10 (3/10 Class)		-22	22 - 22 = 0
3/11		16	15	0 + 15 = 15
10/11		15	15	15 + 15 = 30
	12/11 (3/11 Class)		-15	30 - 15 = 15
	9/12 (10/11 Class)	15	-15	15 - 15 = 0
6/13 (Proposed)	5/14	15		0 + 15 = 15

### Licensing Examination Statistics

The following statistics, furnished by the Pearson Vue and published by the National Council of State Boards of Nursing as "Jurisdictional Summary of All First-Time Candidates Educated in Member Board Jurisdiction," for the period January 2008 through March 2013, specify the pass percentage rate for graduates of the Healthcare College of California Vocational Nursing Program on the National Council Licensure Examination for Practical (Vocational) Nurses (NCLEX-PN®).

NCLEX-PN® Licensure Examination Data							
Quarterly Statistics				Annual Statistics*			
Quarter	# Candidates	# Passed	% Passed	State Average Quarterly Pass Rate	Program Average Annual Pass Rate	State Average Annual Pass Rate	Variance from State Average Annual Pass Rate
Jan - Mar 2008	2	1	50%	75%	50%	75%	-25
Apr - Jun 2008	24	6	25%	70%	27%	74%	-47
July - Sep 2008	1	1	100%	74%	30%	74%	-44
Oct - Dec 2008	No Candidates Tested			73%	30%	73%	-43
Jan - Mar 2009	21	14	67%	70%	46%	72%	-26
Apr - June 2009	6	4	67%	71%	68%	70%	-2
July - Sep 2009	10	6	60%	74%	65%	72%	-7
Oct - Dec 2009	18	8	44%	76%	58%	73%	-15
Jan - Mar 2010	12	4	33%	76%	48%	74%	-26
Apr - Jun 2010	9	2	22%	75%	41%	75%	-34
Jul - Sep 2010	14	8	57%	76%	42%	75%	-33
Oct - Dec 2010	14	10	71%	77%	49%	76%	-27
Jan - Mar 2011	18	10	56%	80%	55%	77%	-22
Apr-Jun 2011	13	5	39%	71%	56%	76%	-20
Jul - Sep 2011	3	1	33%	74%	54%	76%	-22
Oct - Dec 2011	8	4	50%	74%	48%	75%	-27
Jan - Mar 2012	6	2	33%	77%	40%	74%	-34
Apr - Jun 2012	7	1	14%	72%	33%	74%	-41
Jul - Sep 2012	11	5	45%	74%	38%	74%	-36
Oct - Dec 2012	3	1	33%	70%	33%	74%	-41
Jan - Mar 2013	4	3	75%	75%	40%	73%	-33

\*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 (January to March 2013), the program's average annual pass rate is 40%. The California average annual pass rate for graduates from accredited vocational nursing programs who took the NCLEX-PN® for the first time is 73%. The average annual pass rate for the Healthcare Career College Vocational Nursing Program is 33 percentage points **below** the state average annual pass rate.

### **Faculty and Facilities**

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

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

The program's Board-approved faculty totals twelve (12), including the director. The director has 80% administrative and 20% teaching responsibilities. Twelve (12) instructors are approved to teach clinical.

Based on a maximum enrollment of 48 students, four (4) 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:

"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 clinical facilities that are adequate as to type and variety of patients treated to enable current and proposed students to meet clinical objectives, in accordance with Section 2534 (b) of the Vocational Nursing Rules and Regulations. This has been verified by the consultant.

### Other Considerations

The Board placed the program on provisional approval on September 9, 2011 for a two – year period from September 9, 2011, through September 30, 2013 due to low licensure pass rates. At that time, the program's quarterly pass rate was 39% and its average annual pass rate was 56%. The Board specified corrective actions that included a requirement that the program admit no additional students unless approved by the full Board.

On October 4, 2011 the Board forwarded to the director the Notice of Change in Approval Status (see Attachment B).

Published examination statistics confirm that, of the 21 quarters that the program had candidates take the licensure exam, the program has only two (2) quarters in which the reported average annual pass rates were within ten (10) percentage points of the state average annual pass rate. Currently, the program's **quarterly** pass rate is **75%** and the average **annual** pass rate is **40%**. As such, the program's average **annual** pass rate is **33** percentage points **below** the state average annual pass rate.

Fifteen (15) students graduated on September 30, 2012. These graduates are expected to take the licensure examination in Quarter 1 and 2 of 2013. Currently, no students are enrolled in classes at Healthcare College of California.

On March 11, 2013 the assigned consultant forwarded correspondence requesting submission of two (2) copies and a CD or Flash Drive of pertinent documents from the program's submitted plan and subsequent actions taken to correct identified problems that they desire Board members to consider (see Attachment C).

On March 20, 2013, the Board received correspondence from the program director and two (2) copies and a CD of pertinent documents and subsequent actions taken to correct identified problems that they desire the Board members to consider (see Attachment D). Included in the plan are the following elements:

- Terminal Objectives will be maintained however, an increased emphasis will be placed on NCLEX preparedness.
- Pre-requisite Classes - in the past, the pre-requisite classes were given far in advance of beginning of the VN class. Pre-requisite classes will now be started at the time approval for a class is given by the Board. Additionally, Pharm will be increased to 90 hours and Psych and normal growth and development will decrease to 26 hours.
- Admission and Screening and Selection Criteria - Strict enforcement of testing and screening criteria will be maintained. Rubric created and will be utilized. Essays will be written on site the day of application to the program. Unemployed potential students will be given priority over employed applicants.
- Final Selection Process - Director will have the final authority to select students.
- Remediation - Instructors will be required to submit weekly student progress reports to the director, so that remediation can be implemented early.
- Grading System - Increase the minimum passing rate from 75% to 80%.
- Termination of Students-Students performing consistently poorly will be terminated after due process is given.
- Communication - Weekly meetings between theory and clinical instructors to discuss objectives and student progress will occur.
- Evaluation of Theory and Clinical Faculty - The program director will evaluate theory and clinical instructors consistently. Students will evaluate instructors on a regular basis.
- HESI- HESI comprehensive testing will be integrated to evaluate student progress.
- Program Director will increase her teaching hours in the program to increase early identification of student problems.
- Hire new faculty that have a proven commitment to education.

#### **Recommendations:**

1. **Deny** Healthcare College of California's request to admit 20 full-time students June 17, 2013 graduating on May 15, 2014, to **replace** a class that graduated September 30, 2012.

2. Require the program to continue to admit no additional students unless approved by the full Board.

**Rationale:** As noted previously, the program was placed on provisional approval on September 9, 2011. **At that time, the program's quarterly pass rate was 39% and its average annual pass rate was 56%.**

The program's most recent **quarter** pass rate is **75%** and the average **annual** pass rate is **40%**. The program's licensure pass rates have been more than ten (10) percentage points below the state average annual pass rates for nineteen (19) of the twenty-one (21) quarters that licensure data has been recorded for the program. The increase in the **quarter** pass rate is based on four (4) graduates testing during this quarter.

Although the current quarter pass rate is up to 75%, the average annual pass rate is significantly lower than when the program was placed on Provisional Approval on September 9, 2011. Therefore, the requested class is recommended to be denied. The program's Provisional Status is to be reconsidered at the September 2013 Board meeting. The program had fifteen (15) students graduate on September 30, 2012. Licensure data for these graduates should be available in Quarter 2 of 2013. This data should be available by the September 2013 Board meeting. The school was notified that it could request a class start at the September 2013 Board meeting.

The Director in her plan to bring up the program's pass rates indicated the decision-making authority changed to the program director during 2012. Although, the director was expected to have been in control of the program, prior to, and since the program was placed on Provisional Approval, this was not occurring due to administrative conflicts. Due to the recent change in executive personnel, the director is optimistic that student outcomes on the licensure examination will change positively in the future. However, since there have been only two (2) quarters in which the average annual pass rate was within ten (10) percentage points of the state average annual pass rate since September 2009, it is advised to proceed slowly.

No students are currently enrolled in classes at this time. Board staff will continue to monitor the program by tracking its licensure examination pass rate quarterly.

Attachment A: History of Prior Board Actions.

Attachment B: Notice of Change in Accreditation Status Dated October 4, 2011.

Attachment C: Board Correspondence Dated March 11, 2013.

Attachment D: Program Correspondence Dated March 18, 2013; Received March 20, 2013.

# Agenda Item #13.A.4., Attachment A

## HEALTHCARE COLLEGE OF CALIFORNIA

### History of Prior Board Actions

- On January 9, 2007, the Executive Officer approved the Nursing Care Provider School, Stockton's request to begin a vocational nursing program on January 15, 2007, only, with a projected graduation date of December 20, 2007, with an initial class of 40 students; and approved the program curriculum for 1626 hours, including 667 theory, and 959 clinical hours.
- On June 22, 2007, the Executive Officer approved the program's request to change the program name, from Nursing Care Provider School, Stockton, to Healthcare College of California Vocational Nursing Program.
- On November 7, 2007, the Executive Officer approved initial full accreditation for the Healthcare College of California Vocational Nursing Program for the period from November 7, 2007, through November 6, 2011, and issued a certificate accordingly.

The Executive Officer also approved the program's request to admit a full - time class of 40 students to start January 14, 2008 only, with a projected graduation of October 31, 2008. The class will **replace** students graduating on December 28, 2007.

- On February 27, 2008, the Executive Officer approved the program's request to admit 40 students on June 14, 2008 only, with an anticipated graduation date of March 31, 2009.
- On October 8, 2008, the Executive Officer approved the program's request to admit 40 students on November 10, 2008 to **replace** students who graduated October 31, 2008.
- On March 25, 2009, the assigned consultant sent correspondence to the program notifying the director that the program's licensure examination pass rates had fallen below 10 percentage points of the state average pass rate for the past four (4) quarters. The program was asked to provide the Board with a written plan for improving the program's NCLEX-PN<sup>®</sup> pass rates by April 27, 2009.
- On April 1, 2009, the program was asked to submit detailed documentation verifying implementation of the submitted plan of correction, dates of implementation of the plan, the effectiveness of the employed interventions, and modifications, if any, in the submitted plan, on or before April 30, 2009.

The requested report was to include a comprehensive analysis of the program, specific actions to improve the program pass rates, timeline for implementation, and expected outcomes. The following elements were to be addressed in the analysis:

- a. Admission criteria.
  - b. Screening and Selection Criteria.
  - c. Terminal Objectives.
  - d. Curriculum Objectives.
  - e. Instructional Plan.
  - f. Theory and Clinical Objectives for Each Course.
  - g. Lesson Plans for Each Course.
  - h. List of Textbooks.
  - i. Attendance Policy.
  - j. Remediation Policy.
  - k. Evaluations of Theory and Clinical Faculty.
  - l. Evaluations of Theory Presentations.
  - m. Evaluations of Clinical Rotations and Their Correlation to Theory Presentations.
- On April 8, 2009, the Executive Officer **denied** the program's request to admit a class of 40 students and **approved** the admission of 20 students on April 22, 2009 only, to **replace** students who graduated on April 18, 2009. Additionally, the program was required to submit a follow – up report by April 30, 2009, that included a comprehensive program analysis, specific actions to improve program pass rates, timeline for implementation, and expected outcomes.
  - On April 20, 2009 the Board received the director's response to the notification. As reported, the program is focusing on stricter implementation of the program's tardiness policy; increasing the frequency of meetings between theory and clinical instructors to coordinate teaching; stricter implementation of the program's remediation policy; improving student counseling resources; enhancement of library resource materials; and the addition of two NCLEX-PN® review classes.
  - On April 30, 2009, the director stated, "Your letter ... appears to assume that the low pass rates could be attributed to a wide range of factors, from admission policy to theory presentations and clinical rotations. Although there is always room for improvement in all areas of training, we continue to hold on to our original assessment that full time employment is the main culprit behind the school's low pass rate for its first batch of graduates... The results of the first batch of graduates must not be used as a yardstick to measure our present performance as a training school."
  - On May 12, 2009, a new program director was approved.
  - On October 20, 2009, the Executive Officer approved the program's admission of 40 students on October 20, 2009, only, to **replace** the class graduating on September 12, 2009.

- On November 20, 2009, the Executive Officer approved the Healthcare College of California Vocational Nursing Program's request to admit a class of 30 students on April 5, 2010 only, to **replace** a class graduating on March 27, 2010.
- On March 1, 2010, the Executive Officer **denied** the Healthcare College of California Vocational Nursing Program request to admit a class of **40** students on February 22, 2010, to **replace** a class graduating on February 12, 2010; and **approved** the program's admission of a class of **30** students on February 22, 2010 only, to **replace** a class graduating on February 12, 2010.
- On November 16, 2010, the SNEC and assigned consultant requested the following information per telephone, relative to a program request:
  - a. Revised enrollment information for all classes from 2009 – 2011.
  - b. List of currently approved faculty.
  - c. List of currently approved clinical facilities.
  - d. Interventions to improve student achievement.

Following the telephone call, the assigned consultant forwarded electronic correspondence memorializing the above conference call. The director was advised that submission of the requested information and documents was required by December 15, 2010.

- On December 4, 2010, the program was notified that its average annual pass rate had fallen more than ten (10) percentage points below the state average annual pass rate for the past four (4) quarters. The program was requested to submit a written plan for improving their NCLEX-PN<sup>®</sup> pass rates by December 17, 2010.
- On December 16, 2010, the Board received program documents related to its written plan to increase NCLEX-PN<sup>®</sup> pass rates. **The enrollment information, list of approved faculty, and clinical facilities were not submitted as requested on November 16, 2010.**
- On December 21, 2010, the assigned consultant forwarded electronic correspondence advising that the requested information had not been submitted as agreed. The director was advised that action on the program's request for approval to admit a new class would be delayed pending receipt of the requested documents.
- On December 22, 2010, the Board received documents relative to enrollment, faculty and facilities.
- On January 4, 2011, the assigned consultant issued the program a Notice of Violation for noncompliance with California Code of Regulations Section 2530 (k), due to the program's admission of a class without prior Board approval.

- On January 13, 2011, the Board received documents presenting the program's plan to prevent future admissions of unapproved classes.
- On January 26, 2011, the Executive Officer **denied** the Healthcare College of California Vocational Nursing Program's request to admit full – time class of **30** students on February 22, 2011, graduating December 30, 2011 to **replace** a class that graduated on August 14, 2010; and, **approved** the program's admission of a full-time class of **20** students on February 22, 2011, graduating December 30, 2011 to **replace** a class that graduated on August 14, 2010. Additionally, the program was required to continue obtaining Board approval prior to the admission of each class.
- On May 16, 2011, the program was notified that its average annual pass rates had fallen more than ten (10) percentage points below the state average annual pass rate for the past six (6) quarters. The program was requested to submit a written evaluation of the plan for improving their NCLEX-PN® pass rates by June 3, 2011.
- On June 15, 2011, the program director advised the Board that admission of the February 22, 2011 class had been delayed to March 1, 2011.
- **On June 21, 2011, the assigned consultant contacted the school relative to the program's failure to submit an evaluation of the plan to improve licensure pass rates that was due June 3, 2011.**
- On June 27, 2011, the Board received documents related to the effectiveness of the plan to improve licensure pass rates.
- **On July 19, 2011, the Executive Officer deferred action on the program's request to admit 20 full – time students, for consideration by the Board at the September 9, 2011 meeting. This decision was based on the following critical factors:**
  - a. **The program's extensive history of poor student achievement;**
  - b. **Noncompliance with regulatory requirements regarding performance pass rate statistics;**
  - c. **Noncompliance with regulatory requirements relative to the admission of students; and**
  - d. **Repeated lack of compliance with prior requests for information.**
  - e. **The assigned consultant forwarded correspondence to the director advising of the Executive Officer's decisions.**
- On July 20, 2011, the Board received electronic correspondence from the program director, dated July 19, 2011 regarding the Executive Officer's decision. Based on submitted information, the director was requested to provide information relative to the program's planned utilization of DnD Educator programs.

- On July 20, 2011, the program was notified that its average annual pass rates had fallen more than ten (10) percentage points below the state average annual pass rate for the past seven (7) quarters. The program was requested to submit a written evaluation of the plan for improving their NCLEX-PN® pass rates by August 1, 2011.
- On July 26, 2011, the assigned consultant forwarded correspondence to the director regarding the program's failure to submit requested information regarding its utilization of DnD Educator programs. Submission of the requested information was requested by Friday, July 29, 2011.
- On July 28, 2011; the Board received electronic correspondence from the director regarding the utilization of DnD Educator programs as a part of its plan to improve its pass rates on the NCLEX-PN®
- On August 5, 2011, the assigned consultant forwarded correspondence requesting submission of fifteen (15) copies of pertinent documents from the December 16, 2010, plan and subsequent actions taken to correct identified problems that they desire Board members to consider.
- On September 9, 2011, the Board placed Healthcare Career College of California Vocational Nursing Program on provisional accreditation for the two-year period from September 9, 2011, through September 30, 2013, and issued a notice to the program to identify specific areas of noncompliance and requirements for correction as referenced in Section 2526.1 (e) of the California Code of Regulations; **and**, denied the program's request to admit 20 full-time students on September 19, 2011, graduating July 13, 2012, to **replace** a class that graduated December 30, 2010; **and**, approved the program's admission of 15 full – time students on September 19, 2011, graduating July 13, 2012, to **replace** a class that graduated December 30, 2010; **and**,
- Required the program to admit no additional students unless approved by the full Board; and, required the program to bring its average annual pass rate to no more than ten (10) percentage points below the State average annual pass rate by **September 1, 2013**; **and**,
- Required the program to submit follow-up reports in 9 months, but no later than **June 1, 2012**, and 21 months, but no later than **June 1, 2013**. The reports must include a comprehensive analysis of the program, specific actions taken to improve program pass rates, timeline for implementation, and the effect of employed interventions. The following elements must be addressed in the analysis.
  - a. Admission Criteria.
  - b. Screening and Selection Criteria.
  - c. Terminal Objectives.

- d. Curriculum Objectives.
- e. Instructional Plan.
- f. Theory and Clinical Objectives for Each Course.
- g. Lesson Plans for Each Course.
- h. Textbooks.
- i. Attendance Policy.
- j. Remediation Policy.
- k. Evaluations of Theory and Clinical Faculty.
- l. Evaluations of Theory Presentations.
- m. Evaluations of Clinical Rotations and Their Correlation to Theory Presentations.
- n. Evaluation of Student Achievement.
- o. Current Enrollment; **and,**

Required the program to comply with all accreditation standards in Article 4 of the Vocational Nursing Practice Act, commencing at Business and Professions Code Section 2880, and Article 5 of the Board's Regulations, commencing at California Code of Regulations, Title 16, Section 2526; **and,** required the program to demonstrate incremental progress in correcting the violations. If the program fails to satisfactorily demonstrate incremental progress, the full Board may revoke the program's accreditation; **and,** failure to take any of these corrective actions may cause the full Board to revoke the program's accreditation; **and,** placed the program on the **September 2013** Board agenda for reconsideration of provisional accreditation.

- On October 4, 2011, the Board forwarded to the director a Notice of Change in Accreditation Status.
- On April 17, 2012, the assigned consultant forwarded correspondence requesting submission of eighteen (18) copies of pertinent documents from the program's submitted plan and subsequent actions taken to correct identified problems that they desire Board members to consider.
- On April 18, 2012, the Board received correspondence from the program director and eighteen (18) copies of pertinent documents and subsequent actions taken to correct identified problems that they desire the Board members to consider.
- On March 11, 2013, the assigned consultant forwarded correspondence requesting submission of two (2) copies and a CD or Flash Drive of pertinent documents from the program's submitted plan and subsequent actions taken to correct identified problems that they desire Board members to consider.
- On March 21, 2013, the Board received correspondence from the program director and two (2) copies and a CD of pertinent documents and subsequent actions taken to correct identified problems that they desire the Board members to consider.

# Agenda Item #13.A.4., Attachment B



STATE AND CONSUMER SERVICES AGENCY • GOVERNOR EDWIN G. BRUNING JR.  
**BOARD OF VOCATIONAL NURSING & PSYCHIATRIC TECHNICIANS**  
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## CERTIFIED MAIL

October 4, 2011

Milva Quail, Director  
Healthcare College of California  
141 E. Acacia Street  
Stockton, CA 95002

**Subject: Notice of Change in Accreditation Status**

Dear Ms. Quail:

Pursuant to the action of the Board of Vocational Nursing and Psychiatric Technicians (Board) on September 9, 2011, the status of the Healthcare College of California Vocational Nursing Program has been changed from full accreditation to provisional accreditation for the two – year period from September 9, 2011 through September 30, 2013. The purpose of this letter is to explain the areas of non-compliance found and the corrections required of your program to avoid losing accreditation completely.

Please sign and return the enclosed "Acknowledgement of Change in Accreditation Status" form by **Friday, October 14, 2011**.

### AREAS OF NON-COMPLIANCE [VIOLATION(S)]

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

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

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

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

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

"The program shall have prior Board approval to increase the number of students per class and/or increase the frequency of admission of classes..."

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

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

The program pass rates of the Healthcare College of California Vocational Nursing Program for the past fourteen (14) quarters are set forth in the following table.

NCLEX-PN® Licensure Examination Pass Rates			
Quarter	State Annual Average Pass Rate	Program Annual Average Pass Rate	Variance from State Annual Average Pass Rate
Jan – Mar 2008	75%	50%	-25
Apr – Jun 2008	74%	27%	-47
Jul – Sep 2008	74%	30%	-44
Oct – Dec 2008	73%	30%	-43
Jan – Mar 2009	72%	46%	-26
Apr – Jun 2009	70%	68%	-2
Jul – Sep 2009	72%	65%	-7
Oct – Dec 2009	73%	58%	-15
Jan – Mar 2010	74%	48%	-26
Apr – Jun 2010	75%	41%	-34
Jul – Sep 2010	75%	42%	-33
Oct – Dec 2010	76%	49%	-27
Jan – Mar 2011	77%	55%	-22
Apr – Jun 2011	76%	56%	-20

Based on this data, the program failed to comply with regulatory requirements relative to the submission of reports and information and the admission of students. Further, the program failed to maintain the annual average pass rate, as required by regulation.

**REQUIRED CORRECTION(S)**

1. The Healthcare College of California Vocational Nursing Program shall bring its average annual pass rate to no more than ten (10) percentage points below the State average annual pass rate by September 1, 2013.
2. The program shall submit follow-up reports in 9 months, but no later than **June 1, 2012**, and 21 months, but no later than **June 1, 2013**. The reports must include a comprehensive analysis of the program, specific actions taken to improve program pass rates, timeline for implementation, and the effect of employed interventions. The following elements must be addressed in the analysis.
  - a. Admission Criteria.
  - b. Screening and Selection Criteria.

- c. Terminal Objectives.
  - d. Curriculum Objectives.
  - e. Instructional Plan.
  - f. Theory and Clinical Objectives for Each Course.
  - g. Lesson Plans for Each Course.
  - h. Textbooks.
  - i. Attendance Policy.
  - j. Remediation Policy.
  - k. Evaluations of Theory and Clinical Faculty.
  - l. Evaluations of Theory Presentations.
  - m. Evaluations of Clinical Rotations and Their Correlation to Theory Presentations.
  - n. Evaluation of Student Achievement.
  - o. Current Enrollment.
3. The program shall admit no additional students unless approved by the full Board.
  4. The program shall comply with all accreditation standards in Article 4 of the Vocational Nursing Practice Act, commencing at Business and Professions Code section 2880, and Article 5 of the Board's Regulations, commencing at California Code of Regulations, Title 16, section 2526.
  5. The program shall demonstrate incremental progress in correcting the violations. If the program fails to satisfactorily demonstrate incremental progress, the full Board may revoke the program's accreditation.
  6. Failure to take any of these corrective actions may cause the full Board to revoke the program's accreditation.

In the event additional violations of the accreditation standards are identified, such violations may result in further corrective action or revocation of provisional accreditation.

#### **FUTURE BOARD ACTION**

Your program will be placed on the **September 2013** Board meeting agenda for reconsideration of your accreditation status. The nursing education consultant assigned to your program will ask you to submit documentation of the correction of your violation(s) by the fifteenth day of the second month prior to that Board meeting. If you have additional information that you wish considered beyond the required corrections listed on page 2 and page 3, you must submit this documentation by the fifteenth day of the second month prior to the Board meeting.

#### **OTHER IMPORTANT INFORMATION**

Please be advised that, pursuant to the Board's regulations, the program will not be authorized to admit new classes beyond the established pattern of admissions previously

approved by the Board. The established pattern of admissions approved by the Board is as follows: **Prior Board approval was required for the admission of each class; however, based on the above corrections, the full Board's permission will be required for each future class admission.**

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

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

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

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

Sincerely,



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

Enclosures

cc: Board Members

TBJ:ph



## TITLE 16 CALIFORNIA CODE OF REGULATIONS

### Section 2526.1

#### 2526.1. Provisional Accreditation.

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



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



**Acknowledgement of Change in Accreditation Status**

I, Milva Quail, director of Healthcare College of California Vocational Nursing  
(Director's Name) (Name of Program)

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

Please complete and return this form to the Board by Friday, October 14, 2011.

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

\_\_\_\_\_  
(Signature of Director)

\_\_\_\_\_  
(Date)

# Agenda Item #13.A.4., Attachment C



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) 263-7855 Web www.bvnpt.ca.gov



## CERTIFIED MAIL

March 11, 2013

Milva Quail  
Vocational Nursing Program Director  
Healthcare College of California  
141 East Acacia Street  
Stockton, CA 95002

### ***Re: Consideration of Request to Admit Students While on Provisional Approval***

Dear Ms. Quail:

On September 9, 2011, the Board placed Healthcare College of California Vocational Nursing Program on provisional approval for the two-year period from September 9, 2011, through September 30, 2013 due to low licensure pass rates. As a condition of that action, the program must request full Board approval to admit students to the ***Healthcare Colleges of California Vocational Nursing Program***. The Board is scheduled to consider that request at its meeting scheduled May 9, 2013. That meeting is tentatively scheduled to be held in Milpitas, California.

To ensure dissemination and review by individual Board members and relevant staff for timely consideration prior to the May Board meeting, please submit the following written information by **Friday, March 22, 2013:**

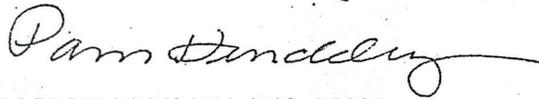
- Two (2) copies of pertinent documents related to subsequent actions taken by the program to correct identified problems ***that you desire Board members to consider***. Please remember existing statutes require that any document considered by the Board will become a public record. Accordingly, please redact all names of students.
- In addition, please provide information on a compact disc (CD) for Board use. Again, please remember to redact any student names prior to copying information onto the CD.

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.

The Board strongly recommends that you plan to attend the meeting and be prepared to respond to questions from Board members relative to your program.

Please contact the Board at (916) 263-7843 should further clarification be needed.

Sincerely,



**PAM HINCKLEY, RN, MSN**  
Nursing Education Consultant  
Board of Vocational Nursing and Psychiatric Technicians  
2535 Capitol Oaks Drive, Suite 205  
Sacramento, CA 95833  
(916) 263-7843 Phone  
(916) 263-7866 Fax  
[Pam\\_hinckley@dca.ca.gov](mailto:Pam_hinckley@dca.ca.gov)

# Agenda Item #13.A.4., Attachment D

BVNPT Received  
on 3/21/13 with

EDY  
JR



**Healthcare College of California**

**Vocational Nursing Program**

T - (209) 430-8743 F - (209) 670-7717

BVNPT

2013 MAR 20 PM 4:38

March 18, 2013

Ms. Pam Hinckley, RN, MSN  
Nursing Education Consultant  
Board of Vocational Nursing & Psychiatric Technicians  
2535 Capitol Oaks Drive, Ste. 205  
Sacramento, CA 95833

Re: -Plan of Action- 2013-

Dear Ms. Hinckley:

Enclosed is our Plan of Action for the requested replacement class, which is also geared towards addressing the school's low pass rate.

Similar plans of action were submitted in the past with no satisfactory results being achieved. With drastic changes in the school's managerial core, and with academic decisions now resting primarily on the shoulders of the Program Director, (as envisioned and expected by the Board), we hope to see encouraging results starting with this replacement class.

Please feel free to comment on the action plan.

Thank you very much.

Sincerely yours,

*Milva G. Quial*  
Milva G. Quial  
School/Program Director

Healthcare College of California  
Plan of Action  
Subject: LOW PASS RATE

The following are the identified problem areas of the program and the actions HCC will implement:

A. PROBLEM: - TERMINAL OBJECTIVES

Problem - Although the terminal objectives of the program will be maintained, the school needs to streamline the manner with which accomplishment of terminal objectives is evaluated, with greater emphasis in the NCLEX preparedness of its graduates

Action – 1) We will incorporate the HESI PN ASSESSMENT plan which will provide students with evaluation tools from the moment they begin their training until they take the NCLEX-PN exam. The HESI product line is strongly recommended by other nursing schools who are extremely satisfied with its very positive results.

2) The HESI A2 will be used as the school's admission assessment exam. The main difference between the HESI A2 and the admission test the school presently uses, is the way the exam is designed. The HESI A2 is primarily designed for nursing schools. The present admission test we use is not. HESI A2 is a more accurate predictor of academic capabilities and one's inclinations towards the nursing profession. The HESI A2 is said to be a tougher exam to pass as compared to other admission exams. If true, then the school starts with a class that is intellectually strong, psychologically and emotionally determined to become nurses, and therefore ready to face the demands of a fast paced VN program. It will be a class composed of students who will not be content with a "C" average.

3) Throughout the program, students will be provided with HESI practice tests written at the critical thinking level. These exams test students on their skills in clinical application.

4) Throughout the program, students will also be given HESI case studies. These case studies involve a range of realistic patient scenarios, where students learn to manage complex conditions and make sound clinical judgment.

5) Throughout the program, students will be given HESI specialty exams, designed to evaluate their abilities at any stage of the curriculum. It measures the student's ability to apply concepts related to a specific clinical nursing content area. HESI specialty exams can also be used as final exams in 10 specialty areas.

6) HESI exit exams will be incorporated in the program. These exams will enable the school to measure students' readiness for the NCLEX-PN examination. It also

identifies the strengths and weaknesses of the student and the possible need for remediation prior to taking the NCLEX-PN.

7) Passing the HESI exit exams will be a requirement for graduation.

8) HESI live review. All graduating students will be required to attend this review course, which can be customized to focus on areas identified by both students and faculty to be the areas where students would need help the most.

9) Faculty development using Evolve's Master Teacher Development course.

Rationale - The above stated actions, if given to a class that is determined to succeed in the nursing program and profession will enhance their readiness to take the NCLEX-PN exam and better prepare them to face the challenging world of the nursing profession.

Faculty development will greatly improve quality of instruction. It gives faculty a broader and brighter perspective of the teaching profession. It builds confidence and translates into a more positive teacher-student relationship.

Timeline for implementation – Incoming class.

Timeline for expected outcomes – Within a span of 4 weeks from the start of class, the school will be able to determine whether or not the incoming class is better compared to previous classes and whether or not the HESI program is working towards the benefit of all concerned.

#### **B. PROBLEM: SCHEDULE OF PREREQUISITE CLASSES -**

Problem - The school started the prereq's classes even before the BVNPT Board had acted on the school's request for a replacement class. Waiting time between the last day of prereq's and the day of Board approval for a replacement class was always more than a month. There were times when the students had to wait for almost 3 months.

Action taken – Prerequisite courses will not be scheduled unless the Board has approved the school's request for a replacement class.

Rationale for action taken - The long wait impacts student motivation and learning momentum. The longer the wait, the more it adversely affects a student's retention, and even more severely for courses like Anatomy & Physiology and Pharmacology.

Timeline for implementation- Incoming class and every class thereafter.

#### **C. PROBLEM: HOURS FOR EACH PREREQUISITE COURSE:**

Problem – There are 4 prerequisite courses. Each prerequisite course has a total of 54 lecture hours. Thus:

1. Psych - 54 hrs.
2. NGD - 54 hrs.
3. A & P - 54 hrs.
4. Pharma - 54 hrs.

We believe that Psych and NGD need to be reduced to 26 hrs. each. A & P will retain its 54 hrs. and Pharma will be increased to 90 hrs.

Rationale for action recommended – The present trend of the NCLEX demands that Pharma exposure must be strengthened. Fifty four (54) hours is, obviously, insufficient to expect students to have a confident grasp of the subject matter.

Timeline for implementation – Incoming class and every class thereafter.

#### D. PROBLEM: ADMISSION CRITERIA:

Problem – a) Admission test – Test results were not an honest reflection of the applicant's capabilities. Test was not properly proctored. Despite the policy disallowing cell phones inside the testing area, proctors allowed takers to bring their cell phones. Cell phones have dictionaries and calculators and can access the internet. Takers scored incredibly high in Vocabulary, Math and Science. Takers were able to take photos of the test booklet to be given to friends who had yet to take the test. Takers were not asked to present their IDs, thereby allowing others to take the test for actual applicants.

Action taken – Admission tests will be administered in our designated test area with CCTV cameras installed. Number of test takers will be limited to 4 for every scheduled admission test. IDs will need to be presented to the proctor prior to the start of the test. Cell phones will need to be deposited to the proctor prior to the start of the test. Any attempt to use a cell phone during exam time will result in automatic disqualification.

Rationale – Early on, would be students must understand that the school takes admission of students very seriously and that dishonesty in any way, shape or form will not be tolerated. Test results will more accurately reflect the capabilities of takers due to anti-cheating prevention measures initiated.

Timeline for implementation – Incoming class and every class thereafter.

#### PROBLEM: ADMISSION CRITERIA - (continued):

Problem - b) Deadline set for submission of application requirements not strictly followed. Applicants were allowed to submit requirements up to the first day of class, several of whom the Program Director didn't have a chance to interview.

Action taken – Deadline for submission of admission requirements will be no later than 2 weeks prior to the first day of class, considering that the requested number of students for

the replacement class is only 15. (Deadline dates shall be adjusted for future classes should there be an increase in the number of students approved for enrollment).

Rationale – This will give Program Director more time to review each applicant's documents. It allows PD to meet and interview each applicant who has passed the initial screening (admission test) prior to formal admission into the program. A longer review time will enable PD to make more objective comparisons between applicants, thereby guaranteeing a more thorough selection process.

Timeline for implementation – Incoming class and every class of the same number of enrollees thereafter.

Problem – c) Checklist of required documents not given to applicants. There were complaints from applicants that they were not informed regarding the submission of certain documents, such as transcripts and letters of recommendation.

Action taken – A checklist form will be given to each applicant. (See Attachment A).

Rationale – To keep applicants aware of admission requirements and to prevent unnecessary complaints regarding the lack of proper notification or absence of written requirements for admission.

Timeline for implementation – Incoming class and every class thereafter.

#### E. PROBLEM: SCREENING CRITERIA –

Problem – a) Screening criteria not strictly implemented. The criteria consists of stated percentages for admission test, prerequisite grades, interview with Program Director, and timely submission of admission requirements. Although the school has this criteria in place, there is no rubric designed for this purpose.

Action taken – A rubric has been created. (Please see Attachment B).

Rationale – The rubric clearly presents a fair assessment of an applicant. A rubric will always be an effective tool to pull out and refer to should there be questions/challenges from rejected applicants.

Timeline for implementation – Incoming class and every class thereafter.

#### PROBLEM: SCREENING CRITERIA (Continued)

Problem – b) Essay was limited to just one topic. Essay was allowed to be written outside school premises. Submission at a later time was allowed.

Action taken – There will be at least 4 essay topics. Applicant will not be allowed to choose his/her topic. Essay must be written by the applicant at the school. It needs to be submitted on the same day applicant is filling out other enrollment forms. Essays submitted at later dates will be rejected.

Rationale - The essay reveals an applicant's ability to express thoughts logically. It is also a good gauge of an applicant's grammar and English vocabulary. It gives the Program Director another assessment tool in gauging an applicant's readiness to enroll in a nursing program requiring at least a 12<sup>th</sup> grade level in English. Allowing it to be written outside school premises invites outside help, thereby defeating the very reason for its requirement; thereby reducing it to absolute worthlessness. Limiting the essay topic to only one, (which appears to be the same topic in majority of VN schools), likewise diminishes the assessment accuracy of an applicant's command of the English language. Applicant may have already prepared for the topic through the help of a relative or friend who writes well. The topic must be given on the very minute applicant sits to write the essay and given a good 20 minutes to do so.

Timeline for implementation – Incoming class and every class thereafter.

Problem: c) Employment while enrolled in the VN program. In each class that we had, a good 50% or more of those enrolled were either employed full time or part time. In a fast paced program, full time/part time employment is never a good mix with full time enrollment. We've had only 1 student enrolled full time and working full time who passed the NCLEX-PN on the first attempt. That accomplishment has not been repeated. Every other employed student flunked the NCLEX-PN.

Action – Employment will be made a part of the Screening criteria. Applicants who are not employed will be given preference. Those who hold part time employment will be considered last, depending heavily on how well they score in other areas. Those who are employed full time will not be admitted at all. If they lie regarding their employment status, they shall be terminated from the program as soon as the school obtains convincing evidence regarding their employment. (A perjury statement is found in the school's application for admission).

Rationale – School statistics, (perhaps, not just our school), show that employment, whether full time or part time, while pursuing a 10 to 11 months VN program, has proved disastrous for both the student and the school.

Timeline for implementation – Incoming class and every class thereafter.

#### F. PROBLEM: FINAL SELECTION PROCESS –

Problem: In the past, others in the managerial core, participated, if not, dictated, who should be admitted to the program. The decision to select who among the applicants must be admitted did not rest solely on the Program Director even if the Program

Director was the only one who had reviewed an applicant's file, read applicant's essay, and interviewed the applicant.

Action – Only the Program Director decides who gets to be admitted. The days of Educator v. Investor, Academician v. Business Tactician are over. PD is now in full control.

#### G. PROBLEM: ATTENDANCE – THEORY & CLINICAL -

Problem – Attendance policy was not strictly implemented by both theory and clinical instructors. As a result of this laxity, no student was ever reprimanded for tardiness and/or absences. Weekly reporting of student attendance by instructors never reflected the real attendance situation.

Action – Attendance sheets will be collected from the instructor at exactly 8:16 every morning, and 1:16 every afternoon, for theory classes. Students who have not signed the attendance sheets will be marked absent for the day. If student shows up, he/she may remain in class but may not participate in the day's activities. In the clinical area, Clinical instructors are required to text or call in the names of students who have come in late, which is between 7:01-7:15am. Students arriving after 7:15am are considered absent and will be sent home. They may not remain within the clinical site premises. The same procedure will be followed after their lunch break.

Rationale - Attendance policies are not to be trifled with, more so in the clinical setting where lives of real people are involved. Focus and clarity of purpose is demanded by and in clinical situations. Students who come in late, for reasons valid or otherwise, come in with affected human emotions that may negatively influence clinical performance. Strict adherence to school attendance policies effectively measure a student's commitment to the program.

Timeline for implementation – Incoming class and every class thereafter.

#### H. PROBLEM – REMEDATION POLICY -

Problem – a) Remediation policy was not strictly implemented. Instructors are required to submit to the Program Director the name or names of students who need to be remediated based on classroom performance. Either the referral is done too late, or it is not done at all.

Problem – b) A student who reverts to academically unacceptable performance after being remediated is allowed by instructors to finish the course. The school's remediation policy requires that this particular student should be terminated from the program.

Action – Instructors will be required to submit to the Program Director, a weekly Individual Student Performance Report. This report will include student attendance and quiz/test scores. This will keep the Program Director informed of each student's

academic performance on a weekly basis and will be a very effective assessment tool for remediation purposes. Each student will be given a copy of the report.

Rationale – Slow performance must be nipped in the bud. Remediation must be initiated immediately if the reports show 2 consecutive weeks of academic weakness.

Timeline for implementation – Incoming class and every class thereafter.

#### I. PROBLEM – GRADING SYSTEM –

Problem – The present passing grade of 75% must be increased to 80%. Close to 80% of our students, graduate with a “C” or 75% grade point average. Pass rate for the past 4 classes has been at 30-35%.

Action – Increase the passing grade to 80% for each class.

Rationale - Our own school statistics show that only 20% of the 4 preceding classes graduated with grade point averages of 80% or higher. The same school statistics also show that all of these students who graduated with an 80% or higher GPA, passed the NCLEX-PN on their first attempt. If the school’s pass rate is at 30-35% per class, that tells us that a few who graduated with a 75-79% grade point average were either lucky or did well in the review.

Timeline for implementation – Incoming class and every class thereafter.

#### J. PROBLEM – TERMINATION OF STUDENTS –

Problem – Students who deserved to be terminated from the program, either because of attendance issues, or poor academic performance were not terminated. This became a consistent contentious issue between the Program Director and the “Managerial Core”, with the former arguing for termination and the latter insisting student retention, for reasons usually bordering on personal relationships.

Action - Program Director will terminate students performing poorly. The “managerial core” is gone.

Rationale – School policies exist for a reason. No amount of personal or filial relationships must prevent its strict implementation. Termination due to poor performance, sends a very strong message to remaining students that only the deserving will graduate – just as retaining students performing poorly also sends an equally strong message that the school tolerates, if not, unashamedly condones, poor performance.

Timeline for implementation – Incoming class and every class thereafter.

#### K. PROBLEM - COMMUNICATION BETWEEN THEORY & CLINICAL INSTRUCTORS –

Problem – There was no communication between theory and clinical instructors in order to address student’s progress towards achieving theory and clinical objectives. Weekly student evaluation by instructor was not consistently undertaken.

Action – There will be weekly meetings between theory and clinical instructors to discuss objectives of each course and the weekly progress of students. Correlation of theory and clinical course objectives must be discussed thoroughly and reviewed at the start of each course between instructors and also with students. Weekly evaluation of students by instructor must be consistently done.

Rationale – Constant communication between theory and clinical instructors insures effective presentation of topics to be taught. Weekly evaluation of students will keep them aware of their progress or the lack of it, towards achieving course objectives.

Timeline for implementation – Start of program until completion.

Expected outcome – Students will have a better understanding of topics, which in turn will insure that course objectives will be met.

#### L. PROBLEM – EVALUATION OF CLINICAL ROTATION AND ITS CORRELATION TO THEORY PRESENTATION-

Problem – Despite instructions from the Program Director, theory and clinical instructors failed to meet and evaluate the correlation of clinical rotations to theory presentations, thereby contributing to student difficulty in understanding the correlation between the two components.

Action – Theory and clinical instructors must meet weekly to discuss the correlation between the two components regarding lessons/topics scheduled for that particularly week. They must see to it that they are able to present to the students an unbroken correlation between the theory and clinical areas of a particular lesson or topic.

Rationale – Students will have a better grasp of lessons/topics if they have a better understanding of the correlation between the theory and clinical aspects of each topic. There will be a more effective clinical application of lessons learned in the classroom, if students had a good understanding of the theory-clinical correlation. It will have a considerable impact on the student’s critical thinking ability during clinical rotations.

Timeline for implementation – Start of incoming class until completion.

Expected outcomes – Students will have a better appreciation and understanding of clinical scenarios that may be asked in the NCLEX-PN exam because of improved critical thinking capabilities.

#### M. PROBLEM – EVALUATION OF THEORY & CLINICAL FACULTY-

Problem – Evaluation of theory and clinical faculty by Program Director and students not consistently done.

Action – Program Director will conduct a monthly evaluation of theory and clinical instructors. PD will take time to sit and listen to theory lectures and make unannounced visits to clinical sites while students are on clinical rotation. Students will also be made to evaluate theory and clinical instructors on a monthly basis. Instructors will be made aware of the content of evaluations.

Rationale – PD and student evaluation of instructors encourages rather than stifles academic growth. Instructors who welcome honest and fair criticism of their performance will benefit from these evaluations. There is always room for improvement in the field of education.

Timeline for implementation – Start of incoming class until completion.

#### N. PROBLEM – OTHER CONCERNS THAT DIRECTLY IMPACT THE PROGRAM-

1. Concern – The need for supplemental programs to enhance present curriculum.

Action – The school has decided to integrate HESI's comprehensive product line into the school's curriculum, from admission to exit, upon the advise and suggestion of other VN schools who have had the opportunity to compare different supplemental programs.

Rationale - The school implemented a supplemental program from another company for the school's latest batch. Although, not exactly ineffective, the decision not to continue using the company's program was brought about by results in the company's NCLEX Predictor Test, which our graduates were required to take and pass as a condition for graduation. To our surprise, even the students who struggled to get a low "C" in each class, passed the test with very high scores. With these results, not a single student was held back. Everyone in the class was able to graduate. But, we are convinced that only a good 20% in the class will pass the NCLEX – contrary to what the results of the Predictor Test would have us believe. The question as to how all of the students passed is still unanswered. We do not need to know the answer, but, it is enough reason for us to conclude that this is not the company that will turn things around for the school. Hence, the decision to go with HESI.

Expected outcomes – We expect the same outcomes as that of other schools, presently using HESI's product lines.

2. Concern – The quality of admitted students.

Action – Change the present admission test to the HESI A2 admission test.

Rationale – The HESI A2 admission test is designed to accurately evaluate an applicant’s “suitability” for the nursing program. It is a more difficult test to pass compared to other admission tests available in the market. It is predicted that one who passes the HESI A2 admission test is more likely to remain and succeed in the nursing program. It is a good determinant of one’s intellectual readiness for a nursing course. If the class consists of quality, very well selected students, the likelihood of encountering problems, such as poor attendance, poor academic performance, negative attitude towards school work, is nil.

Timeline for implementation – Incoming class and every class thereafter.

Timeline for expected outcomes – In a matter of 4 weeks from the start of class, the school will be able to determine if the selected/admitted students are quality students, based on weekly reports from instructors.

3. Concern – The need for Program Director to increase teaching hours so as to establish better rapport with students and to be able to directly and more effectively assess the performance of each student.

Action – Program Director would like to increase her teaching hours. Considering that the requested class will be relatively small, PD can reduce her administrative hours and still effectively run the program.

Rationale – If the Program Director is able to carry a substantial teaching load, it will enable her to properly and more effectively assess each student’s performance. Although, weekly reports from instructors can still be a reliable assessment tool, nothing can be more effective than actual and direct observation of student performance through a teacher-student relationship. Academic interventions can be immediately initiated without having to wait for reports coming from third parties.

Timeline for implementation – Incoming class and for every class of the same size.

Expected outcomes – Faster implementation of academic interventions.

4) Concern – The need to hire new instructors.

Action - As soon as the request for a replacement class is approved, we will hire 3 experienced theory and clinical instructors. They are familiar with the supplemental programs that will be incorporated in the school curriculum. They are highly recommended by health professionals the Program Director has worked with in the past.

Rationale - It’s time to bring in new faces and new talent with proven commitment to the teaching profession.

Timeline for implementation – Immediately upon approval of our request for a replacement class.

Expected outcomes - Within 4 weeks after the start of class, we will be able to determine the quality of instruction being delivered by the new hires.

Respectfully submitted:

  
Milva G. Quial, RN, MSN  
Program Director, Healthcare College of CA

**HEALTHCARE COLLEGE OF CALIFORNIA**

141 East Acacia, Ste. B, Stockton, CA 95202

Tel, No. 209-469-4877, Fax 209-469-4762

**Appendix A**

Your application packet should include the following items. Use this Student checklist as your guideline, and submit this list with your application packet. Place an "X" in each box once it is fulfilled:

Application Requirements:

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_

VN Program Batch \_\_\_\_\_

Student use		Do Not Mark. For Institution use only	
Section I	Check	Comments	Check
1. Admission Application			
2. Enrollment Agreement			
3. Installment Agreement			
4. Three letters of recommendation			
5. Diploma (High School or GED)			
6. If Foreign student, Proof of 12 <sup>th</sup> grade equivalency in the US for Foreign student.			
7. Application or Waiver for Transfer of Credit			
8. Sealed Official copy transcripts for credit granting: - A & P - Pharmacology - Psychology - Normal Growth and Development			
9. Copy of Driver's license or ID			
10. Copy of SS No.			
11. Copy of Admission test results,			

HEALTHCARE COLLEGE OF CALIFORNIA

141 East Acacia, Ste. B, Stockton, CA 95202

Tel, No. 209-469-4877, Fax 209-469-4762

Appendix B

Student Name \_\_\_\_\_ Batch # \_\_\_\_\_ Date \_\_\_\_\_

Criteria	70%	80%	90%	100%		Total
	Retakes test with a score > 75%	> 75%	> 85%	> 95%	Multiply by 0.4 (40%) =	32%
GPA of Pre-requisite courses	2.5-2.9	3.0-3.5	3.5-3.9	4.0	Multiply by 0.3 (30%) =	21%
Admission Interview with the program director	<ul style="list-style-type: none"> <li>• Difficulty in articulating thoughts. Nervous, incomplete thoughts. Constant use of “um’s, err’s, etc.” during interview.</li> <li>• Does not sufficiently respond questions. Answer does not reflect an understanding of the question. Answers unasked question.</li> <li>• Body language shows nervousness or disinterest in the interview. Does not appear comfortable or at ease. Slouching or too casual.</li> <li>• Poor interpersonal skills. Does not maintain eye-contact or is limited. Shows disengagement with the topics/interviewer.</li> <li>• Does not show</li> </ul>	<ul style="list-style-type: none"> <li>• Articulates thoughts sufficiently. Somewhat nervous, with some use of “um’s err’s, etc.”</li> <li>• Sufficiently responds to questions. Answers generally reflect only partial understanding of the questions.</li> <li>• Body language shows he/she is generally comfortable and at ease. Sometimes slouched or appeared too casual.</li> <li>• Adequate interpersonal skills. Intermittent eye-contact. At times shows disinterest in topics/interviewer. Conveys excellent interpersonal</li> <li>• Shows some enthusiasm toward entering the program.</li> </ul>	<ul style="list-style-type: none"> <li>• Articulates thoughts well. Speaks clearly during interview.</li> <li>• Responds fully and effectively to all questions. Answers reflect understanding of the questions.</li> <li>• Body language show he/she is comfortable and at ease. Sitting upright and personable.</li> <li>• Great interpersonal skills during interview. Maintains appropriate and consistent eye-contact. Shows good levels of confidence and conveys interest in topics.</li> <li>• Show great enthusiasm toward entering program and initiative toward enrollment process.</li> </ul>	<ul style="list-style-type: none"> <li>• Extremely articulate, speaks clearly and is confident of knowledge. Language exhibits a professional level; No “um’s, err’s, etc.”</li> <li>• Excellent response to questions reflecting an understanding of each question.</li> <li>• Body language shows he/she is very comfortable and at ease. Sitting upright and very personable</li> <li>• Excellent interpersonal skills during interview. Maintains natural eye-contact. Shows confidence during interaction and conveys interest in topics.</li> <li>• Show extreme enthusiasm toward entering the program and initiative toward enrollment process.</li> </ul>	Multiply by 0.2 (20%) =	18%

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	enthusiasm toward entering the program or initiative toward enrollment process.	Exhibits some initiative toward enrollment process.				
<b>Submission of Application</b>	<ul style="list-style-type: none"> <li>• Submission of application after the deadline.</li> <li>• Application not complete, missing documents, documents out of order, writing illegible, missing signatures.</li> </ul>	<ul style="list-style-type: none"> <li>• Submission of application by deadline.</li> <li>• Application may or may not be complete. Documents missing or out of order, writing illegible</li> </ul>	<ul style="list-style-type: none"> <li>• Submission of application and documents by deadline.</li> <li>• Application complete with all documents included. Documents may be out of order. Signatures in place.</li> </ul>	<ul style="list-style-type: none"> <li>• Submission of application and documents before the deadline.</li> <li>• Application is complete, documents are in order, writing is legible and all signatures in place</li> </ul>	Multiply by 0.1	10%
<b>Total</b>						81%

Application requirements complete Yes \_\_\_\_\_ No \_\_\_\_\_

Admission Test score above 75%: Yes \_\_\_\_\_ No \_\_\_\_\_

Cumulative score above 75% Yes \_\_\_\_\_ No \_\_\_\_\_

Eligible for Admission into Program Yes \_\_\_\_\_ No \_\_\_\_\_

\_\_\_\_\_  
 Signature of Program Director

\_\_\_\_\_  
 Date

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Appendix C

Student Name \_\_\_\_\_ Batch # \_\_\_\_\_ Date \_\_\_\_\_

Criteria	70%	80%	90%	100%		Total
<b>Admission Test</b>	Retakes test with a score > 75%	> 75%	> 85%	> 95%	Multiply by 0.35 (35%) =	28%
<b>GPA of Pre-requisite courses</b>	2.5-2.9	3.0-3.5	3.5-3.9	4.0	Multiply by 0.3 (30%) =	21%
<b>Admission Interview with the program director</b>	<ul style="list-style-type: none"> <li>• Difficulty in articulating thoughts. Nervous, incomplete thoughts. Constant use of “um’s, err’s, etc.” during interview.</li> <li>• Does not sufficiently respond questions. Answer does not reflect an understanding of the question. Answers unasked question.</li> <li>• Body language shows nervousness or disinterest in the interview. Does not appear comfortable or at ease. Slouching or too casual.</li> <li>• Poor interpersonal skills. Does not maintain eye-contact or is limited. Shows disengagement with the topics/interviewer.</li> <li>• Does not show</li> </ul>	<ul style="list-style-type: none"> <li>• Articulates thoughts sufficiently. Somewhat nervous, with some use of “um’s err’s, etc.”</li> <li>• Sufficiently responds to questions. Answers generally reflect only partial understanding of the questions.</li> <li>• Body language shows he/she is generally comfortable and at ease. Sometimes slouched or appeared too casual.</li> <li>• Adequate interpersonal skills. Intermittent eye-contact. At times shows disinterest in topics/interviewer. Conveys Excellent interpersonal</li> <li>• Shows some enthusiasm toward entering the program.</li> </ul>	<ul style="list-style-type: none"> <li>• Articulates thoughts well. Speaks clearly during interview.</li> <li>• Responds fully and effectively to all questions. Answers reflect understanding of the questions.</li> <li>• Body language show he/she is comfortable and at ease. Sitting upright and personable.</li> <li>• Great interpersonal skills during interview. Maintains appropriate and consistent eye-contact. Shows good levels of confidence and conveys interest in topics.</li> <li>• Show great enthusiasm toward entering program and initiative toward enrollment process.</li> </ul>	<ul style="list-style-type: none"> <li>• Extremely articulate, speaks clearly and is confident of knowledge. Language exhibits a professional level; No “um’s, err’s, etc.”</li> <li>• Excellent response to questions reflecting an understanding of each question.</li> <li>• Body language shows he/she is very comfortable and at ease. Sitting upright and very personable</li> <li>• Excellent interpersonal skills during interview. Maintains natural eye-contact. Shows confidence during interaction and conveys interest in topics.</li> <li>• Show extreme enthusiasm toward entering the program and initiative toward enrollment process.</li> </ul>	Multiply by 0.2 (20%) =	18%

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	enthusiasm toward entering the program or initiative toward enrollment process.	Exhibits some initiative toward enrollment process.				
<b>Submission of Application</b>	<ul style="list-style-type: none"> <li>• Submission of application after the deadline.</li> <li>• Application not complete, missing documents, documents out of order, writing illegible, missing signatures.</li> </ul>	<ul style="list-style-type: none"> <li>• Submission of application by deadline.</li> <li>• Application may or may not be complete. Documents missing or out of order, writing illegible</li> </ul>	<ul style="list-style-type: none"> <li>• Submission of application and documents by deadline.</li> <li>• Application complete with all documents included. Documents may be out of order. Signatures in place.</li> </ul>	<ul style="list-style-type: none"> <li>• Submission of application and documents before the deadline.</li> <li>• Application is complete, documents are in order, writing is legible and all signatures in place</li> </ul>	Multiply by 0.05 (5%)	5%
<b>Essay</b>	<ul style="list-style-type: none"> <li>• Poor grammar, spelling and sentence structure</li> <li>• Does not meet requirements, illegible.</li> <li>• Thoughts not easily interpreted.</li> </ul>	<ul style="list-style-type: none"> <li>• Adequate grammar, spelling and sentence structure.</li> <li>• Meets requirements, may be illegible</li> <li>• Thoughts adequately developed</li> </ul>	<ul style="list-style-type: none"> <li>• Good grammar, spelling and sentence structure.</li> <li>• Meets requirements, legible</li> <li>• Thoughts a well-developed</li> </ul>	<ul style="list-style-type: none"> <li>• Excellent grammar, spelling and sentence structure.</li> <li>• Meets requirements, legible</li> <li>• Thoughts are excellently expressed and well-developed.</li> </ul>	Multiply by 0.05 (5%)	4.5%
<b>Work Status</b>	Full time employment	Working 16-25 hours a wk	Working part time 10-15 hours a wk.	Not working	Multiply by 0.05 (5%)	5%
<b>Total</b>						81.5%

Application requirements complete Yes \_\_\_\_\_ No \_\_\_\_\_

Admission Test score above 75%: Yes \_\_\_\_\_ No \_\_\_\_\_

Cumulative score above 75% Yes \_\_\_\_\_ No \_\_\_\_\_

Eligible for Admission into Program Yes \_\_\_\_\_ No \_\_\_\_\_

\_\_\_\_\_  
Signature of Program Director

\_\_\_\_\_  
Date