

**STATE OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
BOARD OF REGISTERED NURSING MINUTES**

DATE: September 17-18, 2014

LOCATION: Hilton Orange County/Costa Mesa
3050 Bristol Street
Costa Mesa, CA 92626

PRESENT: Raymond Mallel, President
Michael D. Jackson, MSN, RN, Vice President
Cynthia Klein, RN (arrived @ 9:33 am on 9/18)
Beverly Hayden-Pugh, MA, RN
Elizabeth A. Woods, MSN, FNP, RN
Imelda Ceja-Butkiewicz
Erin Niemela

NOT PRESENT: Trande Phillips, RN
Jeanette Dong

ALSO PRESENT: Louise Bailey, M.Ed., RN, Executive Officer
Stacie Berumen, Assistant Executive Officer
Christina Sprigg, Administration and Licensing Deputy Chief
Beth Scott, Discipline, Probation and Diversion Deputy Chief
Janette Wackerly, Supervising NEC
Miyo Minato, Supervising NEC
Katie Daugherty, NEC
Leslie Moody, NEC
Kay Weinkam, NEC
Carol MacKay, NEC
Susan Engle, NEC
Julie Campbell-Warnock, Research Program Specialist
Claire Yazigi, Legal Counsel
Carol Stanford, Diversion Program Manager
Christyl Cobb, Decisions and Appeals Analyst
Ronnie Whitaker, Legislative and Regulatory Analyst
Rose Ramos, Administrative Assistant
Abraham Levy, Administrative Law Judge
Sherry Ladakis, Deputy Attorney General

Wednesday, September 17, 2014 – 9:00 am

1.0 **Call to Order** – Raymond Mallel, President called the meeting to order at 9:11 am and had the members introduce themselves.

2.0 **Public Comment for Items Not on the Agenda**

No public comment.

3.0 **Disciplinary Matters:**

<u>Reinstatements</u>	<u>Termination/Modification of Probation</u>
Judy Lisk Richard Merritt Raphael Obiora Karyn O'Connor David Trower	Renee Heard-Burroughs Sarah Putchio Patricia Taber

Meeting adjourned at 12:38 pm.

4.0 **Closed Session**

Disciplinary Matters

The Board convened in **closed session** pursuant to Government Code Section 11126(c) (3) to deliberate on the above matters and other disciplinary matters including stipulations and proposed decisions.

5.0 **Adjournment**

Raymond Mallel, President, called the closed session meeting to order at 1:30 pm. The closed session adjourned at 5:04 pm.

Thursday, September 18, 2014 – 9:00 am

1.0 **Call to Order**

Raymond Mallel, President, called the meeting to order at 9:09 am and had the Board Members introduce themselves.

2.0 **Public Comment for Items Not on the Agenda**

Public comment received by Genevieve Clavreul, RN, PhD.

3.0 **Review and Approve Minutes:**

- June 11-12, 2014, Meeting Minutes
- August 6, 2014, Meeting Minutes

No public comment.

MSC: MJ/EW that the Board approve the Minutes from June 11-12, 2014, Board Meeting and the August 6, 2014, Board Meeting (Discipline). 5/0/0 (1 member absent)

4.0 Report on Board Members' Activities

No Board Members' activities to report.

5.0 Board and Department Activities

No Board and Department Activities to report.

5.1 Executive Officer Report

Louise Bailey, Executive Officer presented this report.

Appointments

Tamara Colson, has been appointed assistant general counsel of the California Department of Consumer Affairs. Colson has been chief prosecuting counsel at the California Department of Alcoholic Beverage Control since 2011. She was an adjunct professor at University of the Pacific, McGeorge School of Law from 2010 to 2011 and special assistant inspector general at the Office of the Inspector General from 2006 to 2011. Colson was an administrative law judge at the Office of Administrative Hearings from 2005 to 2006 and deputy attorney general at the California Department of Justice, Office of the Attorney General from 1999 to 2005. Colson was an associate attorney at Kronick Moskovitz Tiedemann and Girard from 1997 to 1999 and judicial extern at the Third District Court of Appeal in 1995. She held several positions at the Junior Statesmen Foundation from 1991 to 1995, including director of the symposium on California Government and Politics and alumni program coordinator. Colson is a member of the Sacramento County Bar Association and the Junior Statesmen Alumni Association. She earned a Juris Doctor degree from the University of California, Davis School of Law. This position does not require Senate Confirmation.

5.2 Board's Budget Update

Taylor Schick, DCA Budget Officer will give a presentation on the BRN budget and fund condition during the Administrative Committee Report.

5.3 Regulations

The enforcement regulations package to add California Code of Regulations section 1441 and amend sections 1403 and 1444.5 was approved by the Office of Administrative Law and made effective on July 23, 2014. California Code of Regulations section 1403 was amended for the Board to delegate approval of settlement agreements for revocation, surrender or interim suspension of a license as part of the enforcement regulation package approved by the Office of Administrative Law on July 23, 2014. The regulation requires the Executive Officer to report on settlement approvals at regularly scheduled board meetings. The EO reviewed and signed 40 stipulated licensees' settlement agreements for Voluntary Surrender of their California RN License. Enforcement staff will discuss implementation of Section 1441 during the Diversion Discipline Committee update.

5.4 Meeting with Assembly Member Bonilla

In preparation for the Board's Sunset hearing in March 2015, Louise Bailey, Executive Officer, and Stacie Berumen, Assistant Executive Officer, met with Assembly Member Susan Bonilla, Chairperson of the Assembly Business, Professions, and Consumer Protection committee on August 4, 2014. We met to discuss any questions or concerns the committee might have for the BRN during the sunset process.

5.5 Licensing Staffing

In preparation of the upcoming graduation season the Board has entered into a Memorandum of Understanding (MOU) with the Department of Consumer Affairs, Consumer Information Center (CIC) to assist the board with additional staffing for the Licensing unit. As part of the MOU the CIC will loan two staff to the BRN to assist with application evaluation and processing for a four month period of time starting September 15, 2014 through December 31, 2014 with the option to extend upon request to the department if the business need for staff remains.

Additionally, the board has been approved to hire four limited term employees specifically for application evaluations. Interviews to fill the four limited term employees have been completed and the board is awaiting final approval to hire.

5.6 Joint Audit Committee Update - BreEZe

Audit staff from the Bureau of State Audits conducted a meet and greet with the Department of Consumer Affairs and BRN staff on July 14, 2014. Since that time, the BRN management staff has met many times with the auditors and provided them with all the requested information and materials.

5.7 Criminal Offender Record Information Audit

The Department of Consumer Affairs is conducting an audit with all boards and bureaus to ensure compliance with staff handling of criminal offender record information. The BRN is scheduled to undergo this audit on September 23, 2014. Audit findings will be reported at the next board meeting.

5.8 2014 Survey of Registered Nurses (RN)

The Board contracts with the University of California San Francisco (UCSF) to conduct a biennial survey of RNs in California. The purpose of the survey is to collect and evaluate nursing workforce data to understand the demographics, education, employment patterns, nurse perceptions of the work environment, reasons for discontinuing work in nursing and plans for future employment. This is the ninth in the series of California RN workforce surveys. Previous surveys were conducted in 1990, 1993, 1997, 2004, 2006, 2008, 2010 and 2012.

UCSF and Board staff are currently working on the 2014 RN survey. On April 4, 2014, a survey was mailed out to a sample of 10,000 RNs with active licenses who reside in California and other states. Survey respondents can complete the survey online or mail back the hard copy sent to them. The Survey response period closed September 5, 2014. Surveys were received from almost 56% of the sample. Data from the survey will be analyzed and a report generated providing data for this survey and previous surveys so trends can be reviewed.

5.9 New Graduate RN Survey

BRN in conjunction with the California Institute for Nursing and Healthcare (CINHC), Association of California Nurse Leaders (ACNL), California Student Nurses Association (CSNA) and University of California Los Angeles (UCLA), are preparing to mail out the annual New Graduate RN survey in October 2014.

5.10 Health Professions Education Foundation ADN and BSN Scholarship and Loan Repayment Program

The Health Professions Education Foundation (Foundation) established in 1987 and housed in the Office of Statewide Health Planning and Development Department (OSHPD) provides scholarships and a loan repayment program to Associate and Bachelor of Science Degree nursing students to recruit qualified nurses into medically underserved areas of California. These programs are funded in part through a \$10 surcharge on all RN biennial renewal fees. The 2014 application period will open this Fall. An exact deadline date is not yet available, but keep checking the website for updates. Applications are accepted once a year and are completed and submitted through an online system CalREACH.

Additional information regarding requirements, how to complete an application and much more can be found at:

Foundation: www.healthprofessions.ca.gov

Facebook: www.facebook.com/CalHealthWorkforce

Twitter: www.twitter.com/HealthProfCAgov

5.11 Nurse Midwifery (NMW) Advisory Committee

Certified Nurse Midwives have requested to activate the NMW Advisory Committee. Section 1461 authorizes the board to appoint a committee comprised of one nurse-midwife and one physician with knowledge of standards in the delivery of maternal-child health care, along with one public member and others as deemed appropriate. The purpose of the committee is to advise the board on all matters pertaining to nurse-midwifery as established by the board.

5.12 Request from San Diego Chapter of the American Assembly for Men in Nursing (SD-AAMN)

The Supervising Nursing Education Consultant in the south, presented to the SD-AAMN in May 2014. After the presentation, the President of the SD-AAMN requested the BRN to consider putting some statistical data related to men in nursing in California on the BRN website. This data could be used for recruitment and general information. The BRN will review and consider this request in November, after the completion of the Sunset Report.

5.13 Medical Board of California Prescribing Task Force

The Executive Officer is currently serving as a member of the task force. The mission of this task force is to identify ways to proactively approach and find solutions to the epidemic of prescription drug overdose through education, prevention, best practices, communication, and outreach by engaging all stakeholders with a vision to significantly reduce prescription drug overdoses.

5.14 National Council of State Boards of Nursing (NCSBN) Annual Meeting

The Executive Officer attended the NCSBN annual meeting on August 13-15, 2014 in Chicago. There were numerous reports presented at the meeting and three of the major ones were the result of the Simulation Study, Distance Learning, and the Advance Practice Registered Nurse Compact.

5.15 Recovery Happens Rally

Diversion Program staff attended the Recovery Happens Rally at the State Capitol on September 3, 2014. The rally is a statewide campaign intended to celebrate the lives of people who are recovering from alcohol and or substance use disorders. The rally provides a platform to inform Californians about the positive effects recovery/treatment programs have upon our communities. Approximately 4,000 people attended the rally.

5.16 Public Record Requests

The BRN continues to comply with public record requests and responds within the required timeframes that are set in Government Code Section 6250. For the period of June 5, 2014 through September 9, 2014, the BRN received and processed 13 public record requests.

5.17 Personnel

NEW HIRES		
Name	Classification	Program
Angelica Khan	Associate Governmental Program Analyst	Complaint Intake
Don Wallace	Seasonal Clerk	Complaint Intake
Mark Hayes	Special Investigator	Investigations
Candace Meigs	Special Investigator	Investigations
Cynthia Webster	Special Investigator	Investigations
Joyce Reed	Office Assistant	Mailroom
Gabriella Dulworth	Office Technician	Renewals
Andrea Hightower	Program Technician II	Public Information Center
Kimberly Brauer	Supervising Program Technician II	Licensing
Gabriel Velasquez	Seasonal Clerk	Licensing
PROMOTION		
Name	Classification	Program
John Knowles	Associate Governmental Program Analyst	Probation
Ralph Berumen	Staff Services Analyst	Probation
Bea Vue	Staff Services Analyst	Discipline
Stephanie Morrison	Staff Services Analyst	Diversion

Name	Classification	Program
Brianne Gregory	Associate Governmental Program Analyst	Probation
SEPARATIONS		
Name	Classification	Program
Jules Chao	Seasonal Clerk	Licensing
RETIREMENT		
Name	Classification	Program
Dana Cordova	Associate Governmental Program Analyst	Licensing
Dana Cordova is an Associate Governmental Program Analyst in the Boards International licensing unit. Dana has served the State of California for 32 years. She began her career in public service in October 1982 as a Seasonal Clerk with the Department of Veterans Affairs; and has worked for the board for 20 years. Dana has earned the trust, respect and friendship of all who have worked with her. The Board of Registered Nursing congratulates Dana on her retirement, thank her for her dedication to the Board and commend her outstanding record of service. Dana's official retirement date is October 1, 2014.		

6.0 Report of the Administrative Committee

Raymond Mallel, Chairperson

6.1 Board and Committee Meeting Dates for 2015

No public comment and no motion required.

6.2 Review and Vote on 2014 Sunset Report Draft

Julie Campbell-Warnock, Research Program Specialist presented this report.

Public comment received by BJ Snell, PhD, CNMA

MSC: EN/MJ voted to move forward with the 2014 Sunset Report draft to the Legislature. 6/0/0

6.3 BRN Budget Report

Taylor Schick, DCA Budget Officer presented this report.

Public comment received by Genevieve Clavreul, RN, PhD.

No motion required.

7.0 Report of the Education/Licensing Committee

Michael Jackson, MSN, RN, Chairperson

7.1 Vote On Whether To Ratify Minor Curriculum Revision

Leslie Moody, NEC presented this report.

BACKGROUND:

According to Board policy, Nursing Education Consultants may approve minor curriculum changes that do not significantly alter philosophy, objectives, or content. Approvals must be reported to the Education/Licensing Committee and the Board.

Minor Curriculum revisions include the following categories:

- Curriculum changes
- Work Study programs
- Preceptor programs
- Public Health Nurse (PHN) certificate programs
- Progress reports that are not related to continuing approval
- Approved Nurse Practitioner program adding a category of specialization

The following programs have submitted minor curriculum revisions that have been approved by the NECs:

- California State University, Chico Baccalaureate Degree Nursing Program
 - Holy Names University LVN to BSN Baccalaureate Nursing Degree Program
 - Chabot College Associate Degree Nursing Program
 - College of San Mateo Associate Degree Nursing Program
 - College of the Canyons Associate Degree Nursing Program
 - College of the Sequoias Associate Degree Nursing Program
 - De Anza College Associate Degree Nursing Program
 - Grossmont College Associate Degree Nursing Program
 - ITT Technical Institute, Rancho Cordova Breckinridge School of Nursing Associate Degree Nursing Program
 - Kaplan College Associate Degree Nursing Program
 - Los Angeles Harbor College Associate Degree Nursing Program
 - Los Angeles Valley College Associate Degree Nursing Program
 - Sacramento City College Associate Degree Nursing Program
 - Shepherd University Associate Degree Nursing Program
 - Sierra College Associate Degree Nursing Program
 - Southwestern College Associate Degree Nursing Program
 - University of California, Irvine Nurse Practitioner Program
 - University of San Diego Hahn School of Nursing Nurse Practitioner Program
- Acknowledge Receipt of Program Progress Report:
- Long Beach City College Associate Degree Nursing Program
 - Mt. San Jacinto College, MVC Associate Degree Nursing Program
 - West Coast University – Inland Empire Campus Baccalaureate Degree Nursing Program

No public comment.

MSC: MJ/CK to ratify minor curriculum revision and acknowledge receipt of Program Progress Report. 6/0/0

- 7.2 **Vote On Whether to Approve Education/Licensing Sub-Committee Recommendations**
Leslie Moody, NEC presented this report.

BACKGROUND:

The Education/Licensing Committee met as a Sub-Committee (due to lack of Committee quorum) on August 7, 2014 and makes the following recommendations:

- A. Continue Approval of Prelicensure Nursing Program
 - Simpson University Baccalaureate Degree Nursing Program
 - Chabot College Associate Degree Nursing Program
 - College of the Canyons Associate Degree Nursing Program
 - Mt. San Antonio College Associate Degree Nursing Program
 - Porterville College Associate Degree Nursing Program
 - Sacramento City College Associate Degree Nursing Program
 - San Bernardino Valley College Associate Degree Nursing Program
 - University of San Diego Hahn School of Nursing Entry Level Master's Degree Nursing Program

- B. Defer Action to Continue Approval of Prelicensure Nursing Program
 - Holy Names University LVN to BSN Baccalaureate Degree Nursing Program
 - Kaplan College Associate Degree Nursing Program

- C. Continue Approval of Advance Practice Nursing Program
 - Holy Names University Family Nurse Practitioner Program
 - University of San Diego Hahn School of Nursing Nurse Practitioner Program

- D. Approve Major Curriculum Revision
 - California State University, Bakersfield Nurse Practitioner Program

A summary of the above requests and actions is attached.

No public comment.

MSC: MJ/ICB to approve Education/Licensing Committee recommendations as presented for schools listed in 7.2. 6/0/0

7.3 Vote on Whether to Change Warning Status with Intent to Withdraw Approval to Defer Action to Continue Approval for East Los Angeles College Associate Degree Nursing Program

Shelley Ward, NEC presented this report.

BACKGROUND:

Lurelean Gaines, RN, MSN, is the Program Director/Chairperson

The program is being presented subsequent to the Board's decision to Place the Program on Warning Status With Intent To Withdraw Approval at the February 6, 2014 Board of Registered Nursing meeting. Additionally, the Board required the program to be presented at the August, 2014 Education and Licensing Committee Meeting, and at the September 2014 Board meeting for review, at which time full compliance must be demonstrated. This is in response to findings at the October 7-8, 2013 scheduled continuing approval program.

visit. The program received the attached letter dated February 11, 2014, reiterating the visit findings of the (5) areas of non-compliance, and the (4) actions that the program had to take as voted on by the Board.

A brief summary of prior BRN visits to the East Los Angeles A.D.N. program include: a non-routinely scheduled continuing approval visit conducted in March 2012, to more intensively review the program related to NCLEX examination pass rate outcomes, and to follow-up on resolution of student concerns regarding a faculty member. Consultants conducted a non-routinely scheduled interim visit in December 2011, given that the NCLEX examination pass rates were below 75% for two consecutive years, and student concerns about a specific faculty member. A scheduled interim visit was conducted in May 2010. Ms. Gaines has been the program director for the BRN visits, and for many proceeding years. The college has had changes in the Dean who has oversight of the nursing program, and the President during this time frame.

The program submitted the progress reports required to address the areas of non-compliance per the time frames stipulated by the Board in February 2014. The program also responded to the (1) recommendation issued during the October 2013 visit. The progress reports submitted to the program NEC in February (2/11/14), April (4/14/14) and July (7/7) 2014 demonstrate a progression of actions taken to resolve the areas of non-compliance and the recommendation. This report will continue by describing a summary of the actions taken, and status to date for each regulation section. The progress report submitted and dated July 7, 2014 (45 pages) is the basis for the summary. The attached items from this progress report are intended to provide additional points of clarification and do not represent the entire progress report received.

Non-Compliance (s): (5):

CCR SECTION 1424(b)(1)- Administration/Organization – Program Evaluation¹ - The program lacks evidence of implementation of the systematic plan for total program evaluation.

The progress report affirms that faculty have reviewed and reaffirmed the systematic plan for program evaluation that they intend to use (attached). The report specifies how they plan to measure attrition rates. Policies and procedures for admission, selection and progression serve as the basis for evaluation. Copies of faculty meeting minutes were provided demonstrating faculty communication and actions related to aspects of program evaluation from October 2013- May 2014. The faculty meeting minutes demonstrate a focus on the areas of non-compliance as well as other general nursing department issues. The plan would benefit from some areas of refinement; however the actions taken by faculty over the past months demonstrate that they are implementing the program evaluation plan. The program is in-compliance with this requirement.

CCR SECTION 1424(d) - Administration/Organization – Sufficient Resources - The nursing building that provides classroom and skills/simulation lab space lacks sufficient supplies, and requires physical plant repairs and maintenance.

The program provided written updates beginning in October 2013 describing actions that were initiated to address the adequacy of clinical supplies and the physical condition of the G-9 Nursing Building which houses classrooms, skills/simulation labs and faculty office

space. The progress report indicates that the program has been supplied with a budget for supplies for the academic year 2014-2015 (\$4000), and that the Nursing Laboratory Lab Coordinator has a defined schedule and process for inventory and ordering of supplies. The faculty also decided to implement a prior consideration from student input to have students purchase an ELAC customized "Pocket Nurse", so that they would have access to their own personal supplies for optional supplemental practice (\$ 40.05) when away from campus. The use of student purchased clinical supply kits is in practice at many programs. The progress report makes a declarative statement that the program will continue to provide supplies needed for practice and testing. Grant funds are also available to augment supply resource needs.

In the progress report dated 4-11-14 the program reported that all repairs were completed. The program Dean has been instrumental in this process, and highly involved in inspecting the building on a regular basis. The college has a new facilities manager who also facilitated improvements. An ongoing custodial maintenance schedule was developed and implemented. A process for reporting temperature regulation issues was established. The program surveyed student satisfaction with temperature regulation in which the majority agree or strongly agreed to be satisfied with the building temperature (attached).

The assigned NEC toured the building on 6/21/14, with the program Dean and a facilities representative. All prior required physical plant concerns have been addressed. In addition, the program painted, updated carpet, provided for all new student desks, refurbished faculty classroom desks/ whiteboards, and student/faculty lounge furnishings (see attachment). Nursing program faculty that were teaching and available were also interviewed about their satisfaction with the building updates and supply adequacy. Faculty report that adequate clinical supplies are available for instruction. One faculty member who is also one of the assistant program directors has relocated her office back to the G-9 building based on the improvements made. The program intends to survey students/faculty in the next academic year to ensure that clinical practice supplies remain adequate. The program demonstrates compliance in this area.

CCR SECTION 1424(h) - Administration/Organization – Faculty Adequacy - The program lacks a sufficient number of qualified full-time faculty to achieve program objectives.

The program has previously indicated that a minimum of (9) full-time faculty excluding the program director position, would permit for implementing the program for the customary enrollment patterns of (60) students in fall and spring semesters. The need for faculty was most evident in the medical-surgical and psychiatric nursing areas. The Board required the program to decrease new enrollments to (48) per semester, related to faculty resource issues. The progress report reflects new enrollments in fall 2014 to be (48) or less students, and total enrollment to be 213 students.

The program reports that interviews to hire two new full-time tenure track faculty positions occurred on June, 30th, 2014. Four potential candidates (current adjunct faculty), for the two medical-surgical faculty positions are scheduled to meet with the V.P. of Workforce Education and the college President to finalize the selection process, anticipated by the end of July. Recruitment efforts to fill a budgeted position for a long-term substitute faculty (full benefits) for the mental health/psychiatric nursing area have not been successful. The program director states that they are positioned to implement the program that begins

September 2, 2014, with existing program resources and budget allocations should there be a change in the intended hiring process.

Six full-time and (18) BRN qualified part-time faculty comprise the current faculty list at this time. This excludes the program director position which is designated as a 100% administrative position by the college. The program provided the faculty assignment plan (as of 7/7/14) for Fall 2014, reflective of the intended assignments subsequent to the completion of the hiring process. (attached). The program director intends to teach the theory component of the Mental Health /Psych (N268) course.

Pending assignments include:

- Theory- Med./Surg II (N267) - To be determined (TBD) new hire assigned
- Clinical - Med./Surg II (N267) One section of clinical assigned to new hire (TBD)
- Clinical - M/S II (N267) – I.- Oparah is perusing geriatric remediation.
- Theory - Role Transition II (N274) is assigned to new hire (TBD)

The program intends to provide an updated faculty assignment plan by 8/4/14. A determination of compliance with this regulation cannot be rendered at this time.

CCR SECTION 1426(b) – Required Curriculum- The current curriculum does not provide the structure and content to ensure that students have the knowledge, skills and abilities necessary to function and to meet the minimum competency standards of a registered nurse.

The progress report indicates the program will submit a revised curriculum at the end of July. The program director described that the revised curriculum is intended to be implemented in January 2015, subsequent to Board approval in Fall 2014, with newly enrolled students. The existing curriculum is planned to remain in place for currently enrolled students until they complete the program. Faculty minutes convey that the program has been working with a consultant in the revision process, which was suggested by NECs at the time of the October 2013 approval visit. The program reports that the revised curriculum will encompass NCLEX categories and subcategories, IOM recommendations and QSEN competencies. The curriculum framework and major concepts are described as having been revised. Faculty meeting minutes also describe revisions to the existing clinical evaluation tool and medication evaluation tool. The program is currently in the process of addressing the area of non-compliance and requires additional time to demonstrate full compliance, through submission of a curriculum revision by 8/4/14, with subsequent Board approval.

CCR SECTION 1431 – Licensing Examination Pass Rate Standard - The NCLEX examination pass rate for first-time test takers is below 75%.

2013-2014 - 50% (July-March) – 70 taken/35 passed

2012-2013 – 62.28%

2011-2012 – 82.26%

2010-2011 – 69.05%

2009-2010 – 61.67%

2008-2009 – 74.77%

2007-2008 – 64.44%

2006-2007 – 75.68%

The program retained an external consultant to provide a comprehensive review to assist students completing the program in June 2014 to take the NCLEX examination. It was funded by the program. Student evaluation indicated that they benefited from the comprehensive review. The faculty have identified a variety of short term and long strategies, such as the curriculum revision, to improve examination score outcomes focused on both faculty and student initiatives (see attachment). The program is in non-compliance year to date for academic year 2013-2014, and for the prior academic year.

Recommendation (1):

CCR SECTION 1425.1(b) – Faculty Orientation - Formalize the faculty orientation process specific to the nursing program

The program developed a well-structured orientation manual with a detailed orientation completion checklist for new full-time or adjunct faculty.

The Education/Licensing Committee met as a Sub-Committee (due to lack of Committee quorum) on August 7, 2014 and makes the following recommendations:

- **Change program approval status to Defer Action to Continue Approval.**
- **Program to submit quarterly progress reports to NEC, continue to recruit full-time faculty to fill the psych/mental health position, continue to limit program admission/enrollment to 48 students admitted twice annually.**
- **Program will return to Education/Licensing Committee for progress report in August 2015.**

No public comment.

MSC: MJ/RM vote on whether to change Warning Status with Intent to Withdraw Approval to Defer Action to Continue Approval for East Los Angeles College Associate Degree Nursing Program. 6/0/0

- 7.4 Vote on Whether to Grant Continuing Approval for ITT Technical Institute, Rancho Cordova Breckinridge School of Nursing Associate Degree Nursing Program**
Katie Daugherty, NEC presented this report.

BACKGROUND:

Carla Carter, MSN, M.Ed., RN was approved as the Program Director (PD) 11/15/13 and the fifth PD since program inception (March 2012). PD Ms. Carter has 100% (40 hrs/wk) administrative time. Associate Director (AD), Dr. Mott (appointed since 10/13), is the fourth AD and has at least 20% (8 hrs/of 40 hrs/wk) assigned administrative time each quarter.

Since February 2014, the program has been on a “Defer Action for Continuing Program Approval” program status per the attached February 11, 2014 Board Action letter (as attached) with the requirement the program provide evidence of full compliance with the regulations especially with regard to resources (clinical facilities and faculty) to deliver the program to existing and future students for presentation at the August 2014 ELC and September 2014 Board meetings.

The program is a nine quarters program of study. Program enrollment has been indefinitely suspended since September 2013 as specified in the September 2013 Board action letter due to the seven areas of non-compliance and six recommendations identified during the July 2013 continuing approval visit as attached. As initially approved, the program admitted up to a maximum of 30 students twice year (March and September terms). To date the program has admitted three cohorts of students (March 2013, September 2012 and March 2013). ITTRC is accredited by the Accrediting Council for Independent Schools and Colleges (ACICS).

Cohort #1(19) students completed the program in June 2014 with graduates expected to take the NCLEX- RN exam as first time testers in the July 1-Sept. 30, 2014 quarter. The first set of program NCLEX-RN pass rate results are expected to be available in late October-early November 2014.

As of mid-June 2014, total program enrollment now totals 51 students for the two remaining Cohorts #2 and 3. Cohort #2 has 21 students as one of the 22 students transferred to another ITT program in different state. Cohort #3 has 29 students; one of the 30 students completed the Spring term and then withdrew due to personal issues.

In summary program events and Board actions from March 2013-August 2014:

- A continuing program approval visit was triggered in July 2013 due to the loss of two essential clinical affiliations (Sutter Health and Dignity Health) in the Spring 2013 quarter. This resulted in no acute care clinical placements for implementation of the approved program for Cohort#1 to complete the required Adult Nursing II (AN II) clinical hours in Summer 2013 and no OB and PEDS clinical placements for this cohort of students to progress in the program per the July 2013 continuing approval visit findings and the attached 7/13 summary Report of Findings.
- On September 11, 2013 the Board placed the program on Warning Status with Intent to Withdraw Program Approval. Program enrollment was indefinitely suspended and the program was required to submit evidence of full compliance with all nursing education regulations and statutes by December 1, 2013 for presentation at the January 2014 ELC and February 2014 Board meetings per the attached document.
- In October 2013, a minor curriculum change for Cohort #1 students was authorized so this cohort could progress in the program and finish the program in nine quarters. (Quarter 7 Gerontology course was moved to Quarter 8-Winter 2013 and taken along with the Quarter 8 OB/PEDS coursework; Quarter 8 Nursing Roles II course was moved to Quarter 9 and taken with the final nursing Capstone Advanced Med.Surg/Preceptorship in Spring 2014). Program Cohorts #2 and 3 continued to follow the June 2011 initially approved nine quarters course sequence/curriculum.
- In December 2013, ITTRC submitted the required December 1, 2013 Program Compliance Report (PCR) pgs. 1-13 and essential supporting evidence. At the January 2014 ELC and February 2014 Board meeting the program showed evidence of full compliance with the regulations for Cohorts #1, 2, and 3 with the acquisition of the November 1, 2013 signed "limited terms" written clinical agreement/facility contract with Sutter Health. The signed Sutter Health clinical agreement provided essential clinical placements at Sutter General (SGH) and Sutter Memorial (SMF) for the program's existing, 71 students OB, PEDS and Advanced M/S Preceptorship

clinical placements. The "limited terms" Sutter Health contract along with the other submitted evidence meant although the program achieved compliance for the existing 71 program students in these first three program cohorts; ITTRC had not achieved necessary compliance to support program implementation/delivery for future students, particularly related to faculty and clinical placement resources.

- Effective February 11, 2014 as a result of achieving compliance with the BRN regulations for Cohorts #1, 2, and 3 (this included a 1/2014 NEC approved minor curriculum change for the NU 2999 Capstone Preceptorship) the program's approval status was changed from Warning Status with Intent to Withdraw Approval to a status of "Defer Action for Continuing Approval". Board action required a written progress report for March 2014 ELC/April 2014 Board and written evidence of full compliance with all regulations including faculty and clinical resources to deliver the program to existing and future students be demonstrated when the program is presented at the August 2014 ELC and the September 2014 Board meetings with program representatives in attendance. See attached document.
- ITTRC submitted an acceptable written progress report in March 2014 as reported at the March 2014 ELC and April 2014 Board meetings.

Summary of ITTRC PCR evidence in each area of Non-Compliance

In July 2014 ITTRC submitted the written Program Compliance Report (PCR) pgs. 1-7 and supporting evidence showing it had maintained full compliance for Cohorts #1, 2 and 3 since February 2014 as required. The July 2014 PCR and compliance evidence for Cohorts #1, 2 and 3 through July 2014 is summarized by each area of seven areas of non-compliance as listed below.

CCR 1420 (c), (h) PD/AD Insufficient/Ineffective coordination, direction per the July 7/13 BRN reports

- Refer to ITTRC PCR pgs.1-7 and supporting evidence for Summer 2014 per the clinical schedules as attached. The signed "limited terms" clinical agreement with Sutter Memorial and General Hospitals (covering only current Cohort #1, 2, and 3 students thru June 2015), effective November 1, 2013, remains in place without any modification as of July 2014.
- Evidence shows program leadership from November 2014-present demonstrates sufficient effective coordination and direction by the PD in administering the program and providing stability for the program, faculty, students, and affiliating clinical agencies.
- Like the Spring 2014 clinical placement schedules, the Summer 2014 schedules demonstrate availability of adequate clinical sites to implement the course of instruction for remaining Cohorts #2 and 3 in Summer 2014. Fall 2014 schedules are not finalized as of July 2014 but will include Sutter Health placements for OB, PEDS, and Advanced Med.Surg, for the two remaining cohorts through June 2015 and graduation of Cohort # 3 students. Sutter Health SGH and SMF course, student and faculty evaluations are positive and without any identified student or faculty concerns/issues.
- Sierra Vista (SV) Psych clinical rotations have been implemented successfully for the second time and included two clinical days/week as recommended by the

program faculty. SV will be used in Fall 2014 for Cohort #3. Evaluations are positive without any identified student or faculty concerns.

- Program leadership obtained a new acute care clinical placement at a small (58 beds) acute care hospital, Vibra HealthCare Folsom for Spring 2014 placements. Vibra HealthCare was rated as a favorable placement by students and faculty; agency staff reported positive satisfaction with both students and faculty without any program issues identified.
- Asbury LTC/SNF and Sac Post-Acute Rehab use also reflects favorable evaluations related program assignments, students and faculty.

CCR 1424(h) and 1426 (a) Lack of Timely BRN notification of program and curriculum changes per the 7/13 BRN visit reports and CCR 1423 and 1432.

- Refer to ITTRC PCR pgs. 1-7 and supporting evidence. Communications, required updates and changes have been appropriate and timely.

CCR 1424 (e) and (f) Inadequate and Insufficient Program Director (PD)/Assistant Director (AD) time in Administration/Management of Clinical Affiliations per the 7/13 BRN visit reports

- Refer to ITTRC PCR pgs.1-7 and supporting evidence. Evidence indicates PD and AD have provided appropriate timely administration/management of clinical affiliations since November 2013 to the present. See available clinical sites summary attachment.

CCR 1424 (b) (1) Total Program Evaluation per the 7/13 BRN visit reports:

- Refer to ITTRC PCR pgs.1-7 and supplemental documents. Evidence includes raw data course evaluations for Winter 2013 and Spring 2014 completed with a normal range of overall favorable responses in most evaluation areas.
- PD and the program faculty have implemented the updated the Systematic Program Evaluation Plan (SPEP). Evaluation data collection, analysis and reporting activities are on schedule per the written schedules.
- ITTRC Program Advisory Board (PAB) meetings are occurring with appropriate documentation in place.
- HESI NCLEX predictive testing processes, analysis/reporting/monitoring and student remediation activities evidenced and timely. HESI Exit policy was revised and new policy adopted 6/11/14 that included use of a formalized remediation worksheet.
- No student complaints or grievances reported.
- Course evaluation response rates are improved and continue to be monitored term to term by the PD. Faculty analyses and action planning now occurring every term through the appropriate program committees; committee documentation evidencing review/action planning.

CCR 1420(e) and (k), 1424 (d), and (h) Program Administration: Budget and Faculty Resources per the 7/13 BRN visit reports;

Refer to ITTRC Program Compliance Report (PCR) pgs. 1-7 and supporting evidence.

- PD aware any adjustments to the budget require BRN review and approval prior to adjustment.

- As of July 14, 2014 program faculty consists of a total of 11 full time including the PD and three part time/adjuncts per the attached 7/14/14 Faculty Approval roster. Ten faculty including PD are MSN prepared and the remaining four faculty are at least BSN prepared assistant instructors. The required faculty content experts are identified and reviews are being done, documented and presented to program faculty for action/follow up. "Back up" OB faculty still needed at the time of this submission; PD reports one potential OB contact for "OB back up"; PEDS back up (MA) in process of completing PEDS remediation activities. M/S, Psych, and Gero "back up" faculty in place.

CCR 1425.1 (d) Clinically Competent Faculty per the 7/13 BRN visit reports

- Refer to ITTRC PCR pgs. 1-7 and supporting evidence.
- No clinical faculty competency issues reported by the PD/AD, students or agency staff.
- Appropriate faculty competency validation and re-validation completed by PD Ms. Carter and AD Dr. Mott. Ongoing, timely faculty observational visits completed in the Winter and Spring 2014 quarters per site reviewed evidence by the NEC.
- NEC clinical agency visits in Winter and Spring 2014 quarters (Asbury, SGH, SMF, Sac Post- Acute and Vibra HealthCare), reflect satisfaction with student clinical preparation/performance and faculty supervision/oversight.

CCR 1427 (a) Clinical Facilities: No OB, Peds, and Advanced Medical Surgical Placements secured to replace lost clinical affiliations with Sutter Health and Dignity Health per the 7/13 BRN visit reports

- Refer to ITTRC PCR pgs.1-7 and supporting evidence including Summer 2014 schedules for Cohort #2: OB at SGH and PEDS coursework at SMF. Cohort #3: AN II at SMF, SGH, and Vibra HealthCare per the attached schedule.
- In June 2014, the New Dignity Health Education Director (LF) informed Ms. Carter, Dignity Health is unable to provide ITTRC any clinical affiliation until 2018. PD Ms. Carter was told by Dignity (LF) this Dignity Health decision is due to already existent saturation of Dignity Health facilities.
- Marshall Hospital in Placerville has not responded to multiple program requests for placements to date.
- PD Ms. Carter reports potential signed clinical agreements and placements for Fall 2014 term at Sutter Health Roseville and Sutter Health Modesto are pending(both of these facilities can provide necessary M/S, OB, PEDS and Advanced M/S Preceptorships, if secured). These two pending clinical agreements would be open ended contracts and separate from the existing Sutter Health Sutter General and Sutter Memorial signed agreement that only remains in effect until graduation of Cohort #3 in mid-June 2015.

**Tentative Cohort #2 and #3 schedules Fall 2014:
Cohort #2(in 9th quarter; graduating in December 2014)**

- Nursing Capstone/Preceptorship 21 student placements: Sutter Health Care Facilities (SGH and SMF as of this submission).

Cohort # 3 (7th quarter)

- Psych/Mental Health course (G1, 2, 3) at Sierra Vista; Gero course (G1, 2, 3) at Asbury and potentially Sacramento Post-Acute Care facilities.

Winter 2014 Cohort #3 (8th quarter); only cohort remaining in the program:

- OB (G1, 2, 3) at Sutter SGH and PEDS course (G 1, 2, 3) at Sutter SMF.

Spring 2015 Cohort #3 (9th quarter; graduation in June 2015:

- Advanced M/S Preceptorship course (G1, 2, 3) at Sutter SGH and SMF.

ITTRC Program Compliance Report (PCR) evidence for Recommendations per the 7/13 BRN visit reports: Please refer to ITTRC July 2014 PCR pgs. 1-7 and supporting evidence.

Summary NEC Comments:

- Accept ITTRC's July 2014 Program Compliance Report (PCR) pages 1-7 and supporting evidence as providing continuing evidence of compliance with the BRN regulations as it relates to program Cohorts #1, 2, 3.
- Identify the July 2014 PCR evidence does not fully comply with the February 11, 2014 Board action letter requirements (as attached). The program was required to provide necessary evidence of full compliance with all BRN regulations, especially resources (clinical facilities and faculty) to deliver the program for existing and for future program students by the August/September 2014 BRN meetings with program representation in attendance at the meetings.
- Recognize, at the time of this July 2014 submission, there are not sufficient OB/PEDS and Advanced Medical Surgical written clinical agreements to deliver the program to future program students. There has been no extension/modification of the existing "limited terms" SGH and SMF signed agreement. Note, PD Ms. Carter reports at least two potential separate Sutter Health acute care facilities (Roseville and Modesto) written agreements are pending and may be in place by August 2014. PD Ms. Carter understands signed clinical facilities agreements to support future program students must be provided as necessary evidence of full program compliance with the regulations at the August/September 2014 meetings.
- Cohort #2 (21) students are slated to graduate in December 2014; Cohort #3(29) students are slated to complete the program in June 2015.
- Recognize, first time testers NCLEX-RN pass rates for the first graduating ITTRC program cohort (potential N=19) will not be available until late October or early November 2014 even though the program's HESI Exit testing results predict favorable program rates.

The Education/Licensing Committee met as a Sub-Committee (due to lack of Committee quorum) on August 7, 2014 and makes the following recommendations:

- **Maintain Deferred Action for Continuing Approval.**

- NEC will continue to monitor the program.
- Maintain full compliance with all BRN regulations for existing program students (existing program cohorts #2, and #3).
- For the January 2015 Education/Licensing Committee and February 2015 Board meeting, provide a progress report that demonstrates full compliance with all the regulations, especially resources related to adequate type and number of faculty and clinical facilities, to deliver the program to future students.
- Program representatives to be present at January 2015 Education/Licensing Committee and February 2015 Board meetings.
- Continue to suspend enrollment of new program students until the program has demonstrated ability to provide adequate resources to present the program.

No public comment.

MSC: MJ/RM voted on the following:

- Maintain Deferred Action for Continuing Approval;
- NEC will continue to monitor the program;
- Maintain full compliance with all BRN regulations for existing program students (existing program cohorts #2 and #3);
- For the January 2015 Education/Licensing Committee and February 2015 Board meeting, provide a progress report that demonstrates full compliance with all the regulations, especially resources related to adequate type and number of faculty and clinical facilities, to deliver the program to future students;
- For the Program representatives to be present at January 2015 Education/Licensing Committee and February 2015 Board meetings; and
- Continue to suspend enrollment of new program students until the program has demonstrated ability to provide adequate resources to present the program. 6/0/0

7.5 Vote on Whether to Place Shepherd University Associate Degree Nursing Program on Warning Status With Intent to Withdraw Approval.

Miyo Minato, Supervising NEC presented this report.

BACKGROUND:

Misun Sprina Jeon, RN, MSN, is Director of ADN Program since November 2011. On February 26 - 27, 2014, Miyo Minato, SNEC, and Shelley Ward, NEC, conducted a regularly scheduled first continuing approval visit to Shepherd University (SU) ADN Program. Additionally this board-approval visit was done pursuant to CCR 1431(b) for the program's licensing pass rate for first time candidates below 75% for two consecutive academic years.

The program was found in non-compliance in three areas: Sec 1424(h) Insufficient FT faculty; Sec 1426(a) Approved curriculum; Sec 1431 NCLEX pass rate standard. Three recommendations were given: Sec 1424(b)(1) Program evaluation; Sec 1424(d) Sufficient resources; Sec 1425.1(b) Faculty responsibilities for instruction. SU submitted a progress report on June 29, 2014 addressing the findings and the recommendations and specific actions SU has taken and plans to take (Refer to attachment for Progress Report).

SU is a non-profit school, founded in 1999 by Dr. Richard Cornel S. Lee in collaboration with faculty of scholars and professionals envisioning to educate Korean immigrants primarily in Theology, Music, Information Technology, Nursing, and English Language programs. SU has been offering the RN to BSN Program since 2007 and NCLEX Review programs for the community. The Board granted initial approval to SU on May 19, 2010, and the program admitted its first group of students in Fall 2010 at their campus in downtown Los Angeles. Since then, the program was reorganized as School of Nursing in January 2012 and relocated to the current location, 3200 N. San Fernando Rd., Los Angeles, approximately 5 miles away from the original campus, in October 2012. The new campus is on a large lot covering over five acres, and the 83,600 sq. ft. building provides ample spaces for students' learning environment. In December 2013, SU received accreditation from Accrediting Council for Independent Colleges & Schools (ACICS) and a Candidacy Status from WASC in March 2014.

The program's approved curriculum is a six-semester program: Year 1 (Sem1 and 2) General Studies courses; Year 2 (Sem 3 and 4) Year 1 Nursing; and Year 3 (Sem 5 and 6) Year 2 Nursing. The Board approved an enrollment of 66 students per year (33/semester) with the distribution of 44 generic ADN (starting in Sem 1) and 22 LVNs (starting in Sem 5). The program started the nursing courses with Cohort 1 with a group of 33 LVNs (Year 3, Sem 5) with the Board approval and 22 students in the generic ADN courses at the same time. The school admitted a total of 5 cohorts of 33 LVN students between Fall 2010 to Spring 2013. The number admitted into the generic ADN during the same time was usually less than 10, except for Fall 2012 (19 admitted to ADN 11 LVNs). Data showed that the majority of students admitted into the generic ADN program were admitted into Year 2 (Sem 3), who were LVNs who lacked GEs, and only a few students actually started in the first semester.

The enrollment pattern used by the program was such that students admitted as generic ADN students each semester would start in 1st semester or 3rd semester, depending on their completion of the GE courses, and LVN-ADN into the 5th semester when all GE were completed. The program had a small number of students who completed their 6-semesters at SU.

SU's admission practice did not review the number of students enrolled in their courses that were advancing to the next nursing courses (3rd or 5th semester) when new students were admitted. The enrollment number remained 33 per semester, regardless of the number of enrolled students. Consequently their cohort size became greater than the approved 33 students when the advancing students were added to the newly admitted number of students. This enrollment practice created a larger cohort size and complicated clinical placements, scheduling, and faculty assignments. Data also showed that the LVN admissions included a total of 25 LVNs in the 30-unit Option for the first two year, which is unusually high number for this option, compared to other prelicensure nursing programs, which report 0 to 1 or 2 over a few years.

The progress report submitted addressed the areas of noncompliance and showed changes to the enrollment practice starting in fall 2014 that adheres to the Board approved generic and LVN to ADN admissions per cohort. Additionally, the program made minor curriculum changes, approved on June 30, 2014, making their prelicensure GE courses

prerequisites to change the ADN curriculum to four-semester (2 years), which would help with managing the enrollment numbers.

Scheduling and faculty turn-overs were identified concerns. Spring semester class schedule showed variations in starting and ending dates outside of the published school schedule. Some of the courses held clinical days, weeks after the end of the semester. The faculty ensured course hours (theory and clinical) were met, but they were not aware that the class schedules should be consistent with the published schedule. Some students expressed their favor for having staggered schedules stating that schedule helped them with their course load. Students expressed concerns, however, with unexpected class and/or clinical schedule changes with a little notice. They were also concerned with the changes in faculty that occurred from one semester to the next. For example, in OB course, the start date was delayed until a lead faculty for OB was hired. OB and Psych MH courses had part-time faculty as lead faculty for the current semester (Spring). Having adequate full-time faculty, stabilizing faculty turnovers, and strengthening faculty teaching skills were areas NECs discussed with the faculty and SU's administrator as imperatives for program improvement. The progress report addressed these areas. The program hired an experienced nurse educator consultant, Sue Albert, RN, MN, MHA, previous Dean and Director at College of the Canyons AND Program on April 2014, and faculty are working with her to make changes to course syllabi and having educational training for curriculum, evaluations, and course developments. Per the report, the program has added two additional full-time faculty, for a total of seven FT faculty, and is addressing curriculum and teaching concerns NEC had discussed.

The program submitted a progress report in 2012 that addressed the low pass rates when their first NCLEX annual pass rate for 2011-2012 was 72.75% (40/55). With the initial low pass rate, the program changed the policy and required students to pass a comprehensive terminal exam and added a mandatory NCLEX review before advancing to licensure. This corrective measure did not show the desired result as the second annual pass rate for 2012-2013 was lower at 60.61% (40/66). SU second progress report of corrective actions, which were based on their data, included raising the admission GPA for the LVN group to 2.8, changing ATI review system to Kaplan program, implementing passing of a course comprehensive exam for progression and the terminal comprehensive exam, and completing a Kaplan NCLEX review at the end of the program. These additional changes were just implemented in Spring 2014.

The current progress report included the previously implemented policy changes strengthening admission GPA and TEAS scores for selection of candidates and changes of their course repeat policy. Faculty are working to strengthen their transition course, including the Peds/OB knowledge, for advanced placement students. As well, the report identifies ways they are improving support services addressing learning issues and other individual learning needs of students. The program removed the HESI Exam policy that was creating a delay in students' taking the NCLEX Exam within the first six months of graduation. Making notable changes to the NCLEX pass rate takes time after new changes are implemented. Program's changes were made in Spring 2014. The 2013-2014 annual first time pass rate result is 47.50% (19 of 43 passed). The faculty are continuing to work to improve their teaching strategies, course and clinical materials, and evaluating effectiveness of changes implemented.

Two tables below show the NCSBN's pass rates and the overall aggregate pass rate of different nursing option groups of graduates at SU from 2011 to 2014.

Annual NCLEX First Time Pass Rate

2011 - 2012	Taken 55	Passed 40	Percent 72.73%
2012 - 2013	Taken 66	Passed 40	Percent 60.61%
2013- 2014	Taken 43	Passed 19	Percent 44.19%

Aggregate NCLEX First Time Pass Rate by Student Group

Options	Total # students	Passed	Failed	NCLEX First time pass rate
LVN 30 U	24 (16.6%)	10	14	41.67%
LVN Adv	109 (75.2%)	77	32	70.64%
Generic	12 (8.2%)	5	7	41.67%
Total	145 (100%)	92	53	63.45% (Overall rate)

Note: The aggregate table shows a total number of graduates to date for each option. A total of 92.8% (131) of their graduates consisted of LVN advanced placement option students. Breakdown of this group shows that there are 75.2% (109) LVN completion group and 16.6% (24) 30 U option group. There were only 8.2% (12) of graduates that completed their generic ADN program. The majority of the generic students transferred their general studies courses and entered into Semester 3. Comparison of aggregate first time pass rates of different option groups show LVN advanced placement group has 70.64%, while LVN 30 unit option and the generic ADN groups are at 41.67%.

Students described their learning experiences at SU as positive, they reported having caring and qualified faculty teaching them, and clinical experiences at agencies and simulation experiences in the lab give opportunities to practice the theory taught in the classroom. They reported excessive re-using of supplies during lab as ineffective. Faculty is a cohesive group, and they reported on their efforts to review data and plan for changes in their weekly Curriculum and Faculty meetings to correct program's low NCLEX pass rates of their graduates, but they're faced with challenges. They have made their curriculum work a priority and are working to make definitive changes. The faculty members are experienced clinicians and have years of clinical experiences but has a limited prelicensure teaching experience s. The majority of the faculty at the meeting were new to SU, and four faculty members were hired within the previous six months. NECs discussed with faculty and administration the need for an expert curriculum consultation for faculty development and strengthening their curriculum for a successful program. SU promptly hired a curriculum consultant in April, who has been working closely with the faculty.

The program is working very hard and making substantive progress towards correcting noncompliances identified at the visit. They have addressed and corrected the issue related to number of faculty. However, the related noncompliances with curriculum implementation and graduates' continued substandard NCLEX pass rates remain. The program needs additional time to demonstrate effectiveness of the changes the program has made and additional changes currently being implemented, such as the curriculum and faculty development. Refer to attachments 2, 4, and 5 for details.

The Education/Licensing Committee met as a Sub-Committee (due to lack of Committee quorum) on August 7, 2014 and makes the following recommendations:

- Place the program on Warning Status with Intent to Withdraw Approval.
- The program is to notify existing and future students of the status of the school and post the program's status information on the school's Website.
- NEC to monitor school's progress, make a site visit in Spring 2015, and provide progress report to ELC in August 2015.
- The program will ensure that new student admission/enrollment pattern is in accordance with approved cohort size of 33 students

No public comment.

MSC: MJ/CK voted on the following:

- Place the program on Warning Status with Intent to Withdraw Approval;
- The Program is to notify existing and future students of the status of the school and post the program's status information on the school's Website;
- The Program NEC to monitor school's progress, make a site visit in Spring 2015, and provide progress report to ELC in August 2015;
- The Program will ensure that new students admission/enrollment pattern is in accordance with approved cohort size of 33 students; and
- Ratify approval of minor curriculum revision for Shepherd University Associate Degree Nursing Program. 5/0/1

7.6 Vote on Whether to Grant Initial Approval of Prelicensure Nursing Program to Weimar Institute (previously known as Weimar College) Associate Degree Nursing Program
 Kay Weinkam, NEC presented this report.

BACKGROUND:

Shirley Wilson Anderson, RN, M.S.N., Ed.D. is the Program Director

This NEC conducted a site visit from July 7-10, 2014. The program was found to be in compliance with Board rules and regulations.

Weimar Institute is located in Weimar, which is approximately 30 miles northeast of Sacramento in Placer county. The campus is easily reached from the exit from I-80.

Weimar Institute is a private, non-profit, faith based institution and entity of the Weimar Center of Health and Education, which is affiliated with the Seventh-day Adventist Church.

The professionals who developed the Center were able to purchase an abandoned tuberculosis center in Weimar in the late 1970's. They began educating students for a life of Christian service in 1978. Three-hundred sixty-two students have received baccalaureate or associate degrees as of May 2014. Weimar Institute graduated seven students in June 2014: one in health sciences; one in natural science; two in pre-med, and three in theology. Weimar Institute expects to enroll fifty students in fall 2014, including pre-nursing students.

Weimar Institute has received approval from the Bureau for Private Postsecondary Education to award the following degrees: Associate of Science degrees in Health Sciences and General Studies; Bachelor of Arts degrees in English Language, Liberal

Studies, and in Pastoral Ministry; Bachelor of Science degree in Health; a certificate program in Massage and Hydrotherapy; and a certificate program HEALTH (Health Evangelism and Leadership Training for Him). Weimar Institute informs the public that it does not hold regional accreditation. Credits earned at Weimar Institute will, in most cases, be transferable to other Seventh-day Adventist colleges and universities.

After the acceptance of its feasibility study, Weimar College changed its name to Weimar Institute. The Bureau for Private Postsecondary Education approved the name change effective June 13, 2014. Weimar Institute now requests that the Board, if it grants initial approval, does so for the Weimar Institute Associate Degree Nursing Program.

Weimar Institute is pursuing accreditation from the WASC Senior College and University Commission. The first phase is Eligibility. Without accreditation by any U.S. Department-approved accrediting body, education institutions do not meet the eligibility requirements so that students can receive federal or state loans or financial aid. Prospective students are informed of the accreditation status and what this can mean for transferring to other, non-Seventh-day Adventist institutions.

Weimar Institute currently offers a Pre-Nursing Program which consists of the behavioral and natural science, communication, math, and nutrition courses and religion courses to prepare the student for transfer to other Seventh-day Adventist institutes and universities. If granted initial approval, Weimar Institute plans to enroll up to 20 students in January 2015. It will then integrate these students into the cohort for fall 2015 for a total enrollment of 20 students, and admit 20 students every fall thereafter. The first class would graduate in May 2017.

The Board accepted the Feasibility Study for the Weimar College Associate Degree Nursing Program at its June 15, 2011, meeting. Contributing to the delay in seeking Initial Approval was that the person who was initially approved as the director resigned and it took the program time to find a person whose qualifications met the regulation's requirements for appointment as Director.

Dr. Shirley Wilson was hired in June 2012 as the director of the ADN program. The title of that position was recently changed from Director to Chair. She has worked with the Weimar Institute Pre-Nursing Program's Director, Melanie Quion, M.S., RN, in developing the Self-Study, curriculum, and other aspects of the proposed registered nursing program. The plan provides a timeframe for hiring faculty and increasing their numbers as the program evolves. The program projects a need for 4 full-time faculty and 5 part-time faculty for the first year of the program. Eighty percent of the Assistant Chair's full time position will be devoted to teaching responsibilities.

The proposed curriculum will support Weimar Institute's intent that the Nursing Program will exist "to support the college's Seventh-day Adventist mission of service to those in need and alleviation of suffering through health promotion and assisting others to achieve physical, mental and spiritual optimal wellness." The philosophy for the Weimar Institute Nursing Department is based on three main constructs which are: The demonstration of the compassionate ministry of Jesus Christ toward all persons; Health promotion for the whole person (body, mind, and spirit); and Evidence-based nursing process approach (Assessment, Analysis, Planning, Implementation, and Evaluation). The concepts of

Person (Humanity), Environment, Health-illness Continuum, Nursing Education, Student Individuality, and Support Systems are extensions of the three main constructs.

The curriculum extends over two years, four sixteen-week semesters, once the student has completed the pre-requisite science, religion, and liberal arts courses. The total curriculum is 80.5-86.5 semester units. Nursing units are 47.5 (29 theory, 18.5 clinical); communication courses are 6 units; sciences 21-27 units; and other degree requirements are 6 units. The curriculum includes consideration for advanced placement of the LVN student and students with other previously completed health-care related coursework and provides the LVN 30-unit option.

Echo Hall has been remodeled to house the Nursing Department, the science laboratories that support the science courses, and contains an open area that will be used as a study area. In addition to the classrooms provided in this building, classrooms in the main college building will also be available as needed. The main building also contains a designated area available to students for quiet study. The nursing classrooms will be wired for LCD projector capability for use of audio/visual media. Echo Hall contains a six-bed skills lab with planned acquisition of the standard mannequins as well as adult, pediatric, obstetric, and infant simulation mannequins; a computer lab with ten stations; and the Nursing Department Chair and faculty offices. One of the full-time faculty members will be responsible for the skills/simulation lab. Materials and equipment will be purchased as the program develops and as recommended by the course faculty.

Computers will be purchased with ten stations already available in the computer lab. Twenty laptop computers will be available. Additional ones will be purchased with the admission of the fall 2016 cohort, and computers will be updated every three years. The campus is already equipped with a wireless network.

The library is located in a separate building. Texts have been purchased for the library that are the foundation for a collection related to the regulation-required and other clinical specialty areas. The following databases will be available to the program: CINAHL Plus, Pro-Quest Nursing digital subscription, Health Source, Medline and Alt HealthWatch and OVID Journals.

The Program will have one full-time administrative staff person dedicated to the Nursing Department. A campus Student Success Coordinator is available, and student tutors are available through the college. There is a medical clinic on campus to provide health care services. Confidential, no fee pastoral services are available to the students. There is a cafeteria onsite.

In addition to the clinical facilities originally identified in the feasibility study, Weimar Institute sought out and acquired additional clinical placements at Glendale Adventist Medical Center, Loma Linda University Children's Hospital, Pediatric Services of America, and Sierra Nevada Memorial Hospital. Sierra Nevada Memorial Hospital is located about 20 miles from Weimar, and does not have placements of students from any other prelicensure programs. Included in this packet is a chart identifying clinical placement for all four semesters and a key that provides information about the distance of these sites from the Weimar Institute campus. This NEC made site visits to the Pediatric Services of America office in Sacramento, Ukiah Valley Medical Center, St. Helena

Hospital, Feather River Hospital in the town of Paradise, Sierra Nevada Memorial Hospital, Sonora Regional Medical Center, Placer County Action Council-Head Start, and Westview Healthcare Center. The facility representatives confirmed that the addition of clinical groups for this program would not displace students from other prelicensure programs, and that the students would be able to provide direct patient care. All of the necessary contracts have been signed. Those facilities within the Adventist Healthcare group may be able to provide housing for those placements that will require overnight stays due to the distance from campus. Weimar Institute has committed to providing the transportation, housing, and meal arrangements for students for these sites at no additional expense to them.

The Program notes: "Some clinical sites will be geographically located a distance from the main campus. This will require intensive clinical sessions immediately following the theory classes during the same semester. Safe and adequate lodging will be arranged in close proximity to the clinical sites, where students will complete eight-twelve hours of clinical shifts per a twenty-four hour period."

Although the budget presented does show the program's financial resources cover its expenses, the budgets for the first and third year are based on a 100% student retention rate. The program was cautioned about basing the budget on 100% retention. The expenses incurred for faculty and students traveling to the distant clinical placements are not reflected in the budget.

Weimar Institute has identified ten students who have already completed the Pre-Nursing Program and who could start the program in spring 2015.

Recommendations: Grant initial approval to the Weimar Institute Associate Degree Nursing Program. Require that an NEC conduct a visit prior to admission of the first student cohort. An NEC is to conduct interim visits in spring 2016 and 2017 to evaluate implementation of the program.

The Education/Licensing Committee met as a Sub-Committee (due to lack of Committee quorum) on August 7, 2014 and makes the following recommendations:

- **Grant Initial Approval to the Weimar Institute Associate Degree Nursing Program for enrollment of 20 students per year beginning Fall 2015.**
- **NEC will conduct a visit prior to admission of the first student cohort.**

No public comment.

MSC: MJ/RM voted to Grant initial Approval to the Weimar Institute Associate Degree Nursing Program for enrollment of 20 students per year beginning Fall 2015. NEC will conduct a visit prior to admission of the first student cohort. 6/0/0

7.7 2013-14 ELC Goals & Objectives Achievement Report

Leslie Moody, NEC presented this report.

BACKGROUND:

The Education/Licensing Committee annually reviews and reports the achievements of the previous fiscal year relative to the ELC goals and objectives.

The attached report presents achievements during the period of July 1, 2013 – June 30, 2014 relative to the ELC Goals and Objectives 2013-2015 which were Board approved on 02/06/2013.

No public comment.

No official motion was given; however, the report was accepted by the Board.

7.8 NCLEX Pass Rate Update

Katie Daugherty, NEC presented this report.

BACKGROUND:

The Board of Registered Nursing receives quarterly reports from the National Council of State Boards of Nursing (NCSBN) about the NCLEX-RN test results by quarter and with an annual perspective. The following tables show this information for the last 12 months and by each quarter.

NCLEX RESULTS – FIRST TIME CANDIDATES

July 1, 2013-June 30, 2014*

JURISDICTION	TOTAL TAKING TEST	PERCENT PASSED %
California*	10,370	82.41
United States and Territories	155,335	82.56

CALIFORNIA NCLEX RESULTS – FIRST TIME CANDIDATES

By Quarters and Year July 1, 2013-June 30, 2014*

7/01/13- 9/30/13		10/01/13- 12/31/13		1/01/14- 3/31/14		4/01/14- 6/30/14		7/01/13- 6/30/14	
# cand.	% pass	# cand.	% pass	# cand.	% pass	# cand.	% pass	# cand.	% pass
4,057	81.69	946	69.45	2,130	88.08	3,237	83.38	10,370	82.41

**Includes (4), (5), (2) and (3) "re-entry" candidates. April 1, 2013 the 2013 NCLEX-RN Test Plan and the higher Passing Standard of 0.00 logit was implemented and remains effective through March 31, 2016. A logit is a unit of measurement to report relative differences between candidate ability estimates and exam item difficulties.*

- August 1, 2014 NCSBN released the 2014 NCLEX Candidate Frequently Asked Questions (FAQs) as attached.
- August 6, 2014 NCSBN issued a Press Release with a Revised Definition of Entry-Level Nurse as attached.

Nursing Education Consultants (NECs) monitor the NCLEX results of their assigned programs. If a program's first time pass rate is below 75% pass rate for an academic year (July 1-June 30), the NEC sends the program written notification of non-compliance (CCR 1431) and requests the program submit a written assessment and corrective action plan to improve results. The NEC will summarize the program's report for NCLEX improvement for the ELC/Board meetings per the Licensing Examination Passing Standard EDP-I-29 document approved 11/6/13. If a second consecutive year of substandard performance occurs, a continuing approval visit will be scheduled within six months, and the NEC's continuing approval visit findings reported to ELC with program representatives in attendance.

California Board of Registered Nursing
NCLEX-RN Pass Rates First Time Candidates
Comparison of National US Educated and CA Educated Pass Rates
By Degree Type

Academic Year July 1, 2013-June 30, 2014

Academic Year July 1-June 30 [^]	July-Sept		Oct-Dec		Jan-Mar		April-June		2013-2014 Cumulative Totals	
	#Tested	% Pass	#Tested	% Pass	#Tested	% Pass	#Tested	%Pass		
National US Educated- All degree types *	53,734	(80.7)	12,565	(69.0)	38,275	(84.6)	50,758	(86.1)	155,335	(82.5)
CA Educated- All degree types*	4,057	(81.6)	946	(69.4)	2,129	(88.1)	3,237	(83.3)	10,370	(82.4)
National-Associate Degree rates**	28,656	(79.5)	7,406	(64.8)	21,304	(82.1)	28,355	(83.8)	85,721	(80.3)
CA-Associate Degree rates**	2,327	(83.3)	434	(67.0)	1,039	(90.4)	1,698	(82.3)	5,498	(83.0)
National-BSN+ELM rates**/**	23,710	(82.0)	4,880	(75.3)	16,371	(87.9)	21,976	(89.3)	66,937	(85.3)
CA-BSN+ELM rates**/**	1,724	(79.4)	507	(71.4)	1,088	(85.8)	1,536	(84.6)	4,855	(81.6)

*National rate for All Degree types includes four categories of results: Diploma, AD, BSN+ELM, and Special Codes. Use of the Special Codes category may vary from state to state. In CA, the Special Codes category is most commonly used for re-entry candidates such as eight year retake candidates wishing to reinstate an expired license per CCR 1419.3(b). The CA aggregate rate for the All degree types includes AD, BSN+ELM, and Special Codes but no diploma program rates since there are no diploma programs in CA. CA rates by specific degree type exclude special code counts since these are not reported by specific degree type.

**National and CA rates reported by specific degree type include only the specific results for the AD or BSN+ELM categories.

***ELM program rates are included in the BSN degree category by NCSBN.

[^]Note: Cumulative totals in this report may vary from quarterly totals for the number tested by 0 to +/-3 due to NCSBN corrections. These NCSBN corrections do not significantly change previously reported quarterly or cumulative pass rates. April 1, 2013 the NCLEX RN Test Plan changed and the Passing Standard became 0.00 logit.

Source: National Council of State Boards Pass Rate Reports

No public comment and no motion required.

7.9 Licensing Program Report

Christina Sprigg, Administration and licensing Deputy Chief presented this report.

PROGRAM UPDATE:

The Licensing unit evaluators are currently processing the initial review of exam and endorsement applications cashiered in late June/early July. The Board is actively recruiting for the five approved limited term positions; one being a supervisor. I expect to have these filled by the end of September. These positions will be dedicated to the evaluation of California and United States graduate applications and the supervision of support staff.

We continue to improve processes within the licensing unit and with the addition of the limited term staff will have even more oversight to implement additional changes that will assist with the workflow within the unit. This will also allow management the opportunity to: review the processes already in place to ensure that they are effective, update applicant letters for clarity and ensure that processing timeframes are being maintained within our statutory timeframes.

In early October, I will be speaking at the annual Deans and Directors meeting and will be encouraging the use of our online application. This allows students to track their application and will eliminate mailing and cashiering time.

Dana Cordova, senior international associate analyst will be retired from the Board as of October 1st. Dana was very well liked and has been with the Board since 1994. She held several positions within the Board as an analyst then associate and has been serving the state since 1982. Her expertise in the evaluation of international applications and vast knowledge of the international requirements for many countries will be greatly missed. We are currently recruiting for her position.

Advanced Practice

The Board is experiencing a trend of complaints from individuals regarding their Nurse Practitioner Furnishing number and their prescribing privileges. The DEA originally gave prescriptive authority for Schedule 2 and 2N however the individuals were only approved by the Board for Schedule 3, 3N, 4 and 5. Upon renewal of their certificate, the DEA is now verifying via the Board website and referring the individuals back to the Board to obtain Schedule 2 and 2N.

At that time our Advance Practice analysts will pull the original application for verification purposes then, if necessary, refer the applicant to take the three hour course through Contemporary Forums and California Association of Nurse Practitioners.

Public Health Nurse

Recently the Board has been receiving applications from students for Public Health Nurse from Grand Canyon University in Arizona and Touro University in Nevada. Both have only online programs and the Board has not received any documentation or correspondence

from either school regarding the required ninety (90) hours of supervised public health nursing clinical.

STATISTICS:

Board management and staff have been diligently working on statistics with the Department of Consumer Affairs BreZE Reports Team. This will be reflected in the final Sunset Report.

In accordance with Business and Professions Code section 115.5, the Board is required to expedite the licensing process for an applicant whose spouse or partner is an active duty member of the armed forces and is being stationed in California. Since the implementation of this code effective January 1, 2013 through September 1, 2014 the Board has received two hundred thirty (230) applications requesting expedited service. One hundred sixty-five (165) applicants have been permanently licensed as California Registered Nurses. The remaining sixty-five (65) have incomplete applications; thirteen (13) of those have been issued a temporary license as we await additional documents. The cycle time from Board receipt is forty-one days ranging from fifteen days to over one hundred days. The longer processing times are due to an applicant not residing in California thus being required to submit a completed fingerprint card rather than completing the Live Scan process and waiting for transcript or military documents to complete the applicants file.

Public comment received by BJ Snell, PhD, CNMA

No motion required.

8.0 Report of the Legislative Committee Erin Niemela, Chairperson

8.1 Adopt/Modify Positions on Bills of Interest to the Board, and any other Bills of Interest to the Board Introduced during the 2013-2014 Legislative Session Kay Weinkam, NEC presented this report.

AB 186 (Maienschein)

Professions and vocations: military spouses: temporary licenses

No public comment.

MSC: EN/ICB that the Board Watch AB 186. 6/0/0 – Bill is Enrolled.

AB 548 (Salas) Public postsecondary education: community college registered nursing programs

No public comment.

Watch position. No motion was given due to this bill being Chaptered

AB 809 (Logue) Healing arts: telehealth

No public comment.

MSC: EN/ICB that the Board Watch AB 809. 6/0/0 - Bill is Chaptered.

AB 1841 (Mullin) Medical assistants

No public comment.

MSC: EN/RM that the Board Watch AB 1841. 6/0/0 – Bill is Chaptered.

AB 2058 (Wilk) Open meetings

No public comment.

MSC: EN/CK that the Board Watch AB 2058. 6/0/0 – Bill is Enrolled.

AB 2062 (Hernández) Health facilities: surgical technologists

No public comment.

MSC: EN/MJ that the Board Watch AB 2062. 6/0/0 – Bill is Enrolled.

AB 2102 (Ting) Licensees: data collection

No public comment.

MSC: EN/RM that the Board Watch AB 2102. 6/0/0 – Bill is Chaptered.

AB 2247 (Williams) Postsecondary education: accreditation documents

No public comment.

Watch position. No motion was given due to this bill being Chaptered

AB 2396 (Bonta) Convictions: expungement: licenses

No public comment.

MSC: EN/MJ that the Board Watch AB 2396. 6/0/0

AB 2720 (Ting) State agencies: meetings: record of action taken

No public comment.

MSC: EN/MJ that the Board Watch AB 2720. 6/0/0 – Bill is Enrolled.

AB 2736 (Committee on Higher Education) Postsecondary education: California State University

No public comment.

MSC: EN/MJ the Board voted a Neutral on AB 2736. 6/0/0 – Bill is Enrolled.

**SB 850 (Block) Public postsecondary education: community college districts:
baccalaureate degree pilot program**

No public comment.

MSC: EN/RM that the Board Watch SB 850. 6/0/0 – Bill is Enrolled.

SB 911 (Block) Residential care facilities for the elderly

No public comment.

MSC: EN/ICB that the Board Watch SB 911. 6/0/0 – Bill is Enrolled.

**SB 1159 (Lara) Professions and vocations: license applicants: individual tax
identification number**

No public comment.

MSC: EN/EW that the Board Watch SB 1159. 6/0/0 – Bill is Enrolled.

SB 1299 (Padilla) Workplace violence prevention plans: hospitals

Public comments:

Person did not identify herself.
Genevieve Clavreul, RN, PhD

MSC: EN/ICB that the Board Support SB 1299. 6/0/0 – Bill is Enrolled.

9.0 Report of the Diversion/Discipline Committee
Cynthia Klein, RN, Chairperson

9.1 Complaint Intake and Investigations Update
Stacie Berumen, Assistant Executive Officer presented this report.

BACKGROUND:

PROGRAM UPDATES

COMPLAINT INTAKE:

Staff

Complaint Intake has gained many new positions through a Budget Change Proposal (BCP) approved for fiscal year 2014/15 – 1 Associate Governmental Program Analyst (AGPA), 2 Staff Services Analysts (SSA), 1 Office Technician (OT) and 2 Office Assistants (OA).

We hope to have all staff hired by the end of September.

We have been able to fill the vacant AGPA position in Complaint Intake with Angelica Khan. Her start date is September 15, 2014. She was previously in enforcement at the Board of Vocational Nursing and Psychiatric Technicians (BVNPT).

Program

Complaint intake continues to work new complaints, ensuring cases are moving to investigations in a timely manner and that aging cases are worked as a priority.

INVESTIGATIONS:

Staff

The investigation unit has gained many new positions from the BCP approved for fiscal year 2014/15 – 5 Special Investigators and 1 Office Technician. We anticipate hiring our OT position by the end of September and four of the five Investigator positions have been filled. Staff will begin work on various dates in September 2014. There is one remaining southern position pending.

There is also a vacancy for our Investigation Office Technician position. The position is currently vacant due to staff promotion to the Probation Unit, within BRN.

Program

Investigators are focused on clearing all aging cases. There are approximately 51 cases over one year old that have not been completed. The new field investigators will allow us to keep cases in house that are more appropriate to be investigated by the Board, as opposed to being sent to Division of Investigation (DOI).

Statistics

The following are internal numbers (end of month) across all investigators not broken out on the performance measurement report.

BRN Investigation Unit	Sep. 2013	Oct. 2013	Nov. 2013	Dec. 2013	Jan. 2014	Feb. 2014
Total cases assigned	270	256	252	243	223	236
Total cases unassigned (pending)	104	89	59	58	49	52
Average days to case completion	212	278	215	294	326	301
Average cost per case	\$2,920	\$3,447	\$2,792	\$3,312	\$3,529	\$3,804
Cases closed	23	36	34	19	33	28

BRN Investigation Unit	Mar. 2014	Apr. 2014	May 2014	June 2014	Jul. 2014	Aug. 2014
Total cases assigned	251	242	244	236	225	218
Total cases unassigned (pending)	49	74	70	71	88	116
Average days to case completion	327	229	230	209	228	227
Average cost per case	\$3,776	\$3,772	\$2,289	\$3,106	\$3,743	\$3,453
Cases closed	49	37	45	31	28	39

As of July 31, 2014, there were 432 DOI investigations pending.

Outreach:

The Southern Unit presented the BRN Update 2014 to RN staff at St Jude’s Hospital on July 23, 2014. This was a joint presentation with our partners and the Drug Enforcement Agency (DEA). Approximately 100 staff were in attendance.

The Southern Investigative Unit conducted training with Adult Protective Services at their request. A dozen people from the office, both field and supervisory attended. Staff discussed the BRN’s function and jurisdiction, best practices for them to use when they report allegations/filing complaints regarding Registered Nurses, and the general outcomes of our investigative process.

The presentation was well received and investigative staff was invited to a monthly meeting of multiple agencies to discuss elder abuse.

Through networking, staff has connected with the Attorney General’s Office, Bureau of Medical Fraud and Elder Abuse (BMFEA) on several cases involving elder abuse at residential care facilities. The unit is a funded unit and has accepted a case for prosecution completed by the BRN investigators.

We continue to regularly participate in southern regional networking meetings including the Insurance Fraud Task Force, Prescription Drug Abuse Task Force, the FBI Medical Fraud Task force, the Southern District Attorneys Working Group, and the Residential Care Placement Program.

The Northern Investigation Unit is scheduled to attend the September meeting of the Northern Enforcement Network, a workgroup of health related investigation staff. This workgroup has developed working partnerships with the US Drug Enforcement Agency and CA Dept. of Justice MediCal Fraud & Elder Abuse investigators.

No public comment and no motion required.

9.2 Discipline and Probation Update

Beth Scott, Discipline, Probation and Diversion Deputy Chief presented this report.

BACKGROUND:

PROGRAM UPDATE

Staff

The Probation Unit has added an additional probation monitor position at the Associate Governmental Program Analyst (AGPA) level; this position was filled with the promotion of an existing probation monitor. The vacancy for a probation monitor at the Staff Services Analyst level was filled with the promotion of an Office Technician (OT) from the Investigations Unit. The Probation Unit has completed interviews for an additional OT and AGPA, and will fill these positions soon.

The citation and fine unit filled the vacant Staff Services Analyst – Limited Term effective August 18, 2014.

Program – Discipline

The discipline unit is working with the Attorney General office to complete our cases in a timely manner and streamline our processes for efficiency.

Below reflects FY2015 (July 1, 2014 - September 8, 2014) decision statistics:

Decisions adopted	393
Pleadings served	214
Petitions to revoke probation served	23
Surrenders signed by E.O.	40

Staff continues to increase its usage of citation and fine as a constructive method to inform licensees and applicants of violations which do not rise to the level of formal disciplinary action. The discipline unit is concentrating on processing cite and fine cases.

Statistics - Discipline

The BRN continues to work with the DCA BreeZe team to verify the accuracy of the performance measures statistics, formally the E19 report.

Program – Probation

The case load per probation monitor is approximately 143.

Statistics – Probation

Below are the statistics for the Probation program from July 1, 2014 to September 22, 2014.

Probation Data	Numbers	% of Active
Male	241	27%
Female	668	73%
Chemical Dependency	408	45%
Practice Case	228	25%
Mental Health	1	0%
Conviction (Alcohol/Drug = 94)	272	30%
Advanced Certificates	93	10%
Southern California	478	52%
Northern California	417	47%
Tolled at the AG	14	1%
Pending with AG/Board	102	11%
License Revoked YTD	11	1%
License Surrendered YTD	28	3%
Terminated YTD	5	>%
Successfully completed YTD	20	2%
Active in-state probationers	909	
Completed/Revoked/Terminated/ Surrendered YTD	64	
Tolled Probationers	256	
Active and Tolled Probationers	1165	

Public comment received by Genevieve Clavreul, RN, PhD.

No motion required.

9.3 Diversion Program Update and Statistics

Carol Stanford, Diversion Program Manager, presented this report.

BACKGROUND:

Program Update

On June 26 and 27, the Diversion Program Manager presented information regarding the BRN's Diversion Program at the 2nd Annual Dave E. Smith, MD Symposium in San Francisco. This intensive two-day program was led by industry leaders in Addiction Medicine and was designed for Psychologists, Social Workers, Alcohol and Drug Counselors, Marriage and Family Therapists, and other Addiction Treatment Professionals. The conference addressed Advances in Addiction Medicine and Recovery and there were presentations and discussions surrounding addiction treatment in the era of health care reform and parity. New tools in addiction medicine and advances in diagnostic solutions were presented along with the most up to date information relating to treatment and recovery.

The Diversion Liaison Committee Meeting is scheduled for September 24th at the Hilton Garden Inn in Sacramento. The Diversion Discipline Committee chairperson, Executive

Officer, Staff, and DEC Member Chairs are invited to attend. This meeting is held annually and will address any trends and current information relating to the Diversion Program.

The Nurse Facilitator's Conference is scheduled for September 25th also at the Hilton Garden Inn in Sacramento. This conference is conducted to develop greater communication between the facilitators, Board staff and the contractor. There will be discussion regarding the facilitator's role and responsibilities as outlined in the Contract, uniform standards, guidelines and policies.

Contractor Update

The Request for Proposal (RFP) for the Diversion Program contract was posted on June 30, 2014. It was made available for interested parties on the Department of General Services Web site at www.dgs.ca.gov. This has been an extensive collaborative process between several Boards, committees and the Department of Consumer Affairs. BRN is looking forward to the bidding process.

Diversion Evaluation Committees (DEC)

There are currently one public member and two physician member vacancies at this time. Recruitment continues.

Statistics

The Statistical Summary Report for the fiscal year 2013/2014 is attached. As of June 30, 2014, there were 1,893 successful completions.

No public comment and no motion required.

**BOARD OF REGISTERED NURSING
DIVERSION PROGRAM
STATISTICAL SUMMARY
April 1, 2014 - June 30, 2014**

	CURRENT MONTHS	YEAR TO DATE (FY)	PROGRAM TO DATE
INTAKES COMPLETED	56	193	4,857
INTAKE INFORMATION			
Female	43	156	3,806
Male	13	37	1,024
Unknown	0	0	27
Average Age	35-49		
Most Common Worksite	Unemployed/Hospital		
Most Common Specialty	ER/Critical Care		
Most Common Substance Abused	Alcohol/Norco		
PRESENTING PROBLEM AT INTAKE			
Substance Abuse (only)	29	96	3,076
Mental Illness (only)	0	5	157
Dual Diagnosis	22	75	1,552
Undetermined	5	17	72
REFERRAL TYPE			
Board	41	153	3,547
Self	15	40	1,310
*May change after Intake			
ETHNICITY (IF KNOWN) AT INTAKE			
American Indian/Alaska Native	1	2	36
Asian/Asian Indian	2	10	112
African American	3	11	158
Hispanic	6	14	203
Native Hawaiian/Pacific Islander	1	3	23
Caucasian	41	149	3,989
Other	2	4	70
Not Reported	0	0	266
CLOSURES			
Successful Completion	26	114	1,893
Failure to Derive Benefit	0	3	120
Failure to Comply	5	11	960
Moved to Another State	0	0	52
Not Accepted by DEC	1	4	55
Voluntary Withdrawal Post-DEC	5	10	323
Voluntary Withdrawal Pre-DEC	9	25	487
Closed Public Risk	6	30	299
No Longer Eligible	0	3	16
Clinically Inappropriate	3	6	25
Client Expired	0	1	39
Sent to Board Pre-DEC	0	0	1
TOTAL CLOSURES	55	207	4,270
NUMBER OF PARTICIPANTS: 460 (as of June 30, 2014)			

9.3.1 Diversion Evaluation Committee Members

BACKGROUND:

In accordance with B & P Code Section 2770.2, the Board of Registered Nursing is responsible for appointing persons to serve on the Diversion Evaluation Committees. Each Committee for the Diversion Program is composed of three registered nurses, a physician and a public member with expertise in substance use disorders and/or mental health.

RESIGNATION

Below is a Diversion Evaluation Committee Member who resigned for personal reasons.

<u>NAME</u>	<u>TITLE</u>	<u>DEC</u>	<u>NO</u>
David Smith	Physician	San Jose	7

No public comment and no motion required.

9.4 Update: "Uniform Standards Regarding Substance-Abusing Healing Arts Licensees" – Business and Professions Code, Section 315 et. seq.

Ronnie Whitaker, Legislative and Regulatory Analyst presented this report

BACKGROUND:

As directed by the Board at its November 2013 meeting, staff conducted a comparative analysis of the Uniform Standards, Diversion Program, and Probation Program, including the potential fiscal impact. Staff met with Legal Counsel to discuss a number of issues related to Uniform Standards, including the specific recommendations from Doreathea Johnson, Deputy Director, DCA Legal Affairs. Legal Counsel advised the Board continue with the regulatory process, although the Attorney General's Office has not rendered its opinion relative to the Uniform Standards. The Board will be notified if changes are necessary as a result of the opinion.

Staff submitted a report of its findings to the Committee at its March 2014 meeting. The Medical Board of California promulgated regulations implementing the Uniform Standards. A comparison was made and was provided for the committee's consideration at the May 2014 meeting. Staff will begin facilitating a discussion of each standard in conjunction with the attachments.

Public comments:

Individual did not identify herself.
Genevieve Clavreul, RN, PhD

No motion required.

9.5 Update: Enacted Amendments - Enforcement-Regulations

- California Code of Regulations, Article 1, Section 1403, Delegation of Certain Functions
- California Code of Regulations, Article 4, Section 1441, Unprofessional Conduct
- California Code of Regulations, Article 4, Section 1444.5, Disciplinary Guidelines

BACKGROUND:

At its June 2013 meeting, the Board directed staff to proceed with promulgation of a regulatory proposal: 1) delegating to the Executive Officer authority to approve settlement agreements for the revocation, surrender, or interim suspension of a license; 2) defining specified acts such as failure to provide lawfully requested records or to cooperate in a Board-investigation as unprofessional conduct, and 3) prohibiting an administrative law judge from including a stay of revocation in a proposed decision in which there was a finding of fact that the licensee had sexual contact with a patient or had committed an act or been convicted of a sex offense.

The regulatory proposal was submitted to the Office of Administrative Law on July 16, 2013, and a public hearing was held on September 9, 2013. The proposal was submitted to the Office of Administrative Law on June 10, 2014. The proposal was endorsed, approved and became effective on July 23, 2014.

Staff will discuss each change as it relates to the Board, staff and the public.

No public comment and no motion required.

10.0 Report of the Nursing Practice Committee

Trande Phillips, RN, Chairperson

10.1 *Information Only:* Nurse Practitioner National Certifications

Janette Wackerly, NEC presented this report.

BACKGROUND:

Practice Committee request to continue review and discussion of the attachment "National Certification Organizations that meet the certification equivalency for Nurse Practitioner by the Board of Registered Nursing" at the October 9, 2014 Practice Committee meeting.

National Certification Organizations that meet the certification requirement for Nurse Practitioner Equivalency by the Board of Registered Nursing

1. American Academy of Nurse Practitioners
2. American Nurses Credentialing Center
3. Pediatric Nursing Certification Board
4. National Certification Corporation for the Obstetric, Gynecologic and Neonatal Nursing Specialty
5. American Association of Critical-Care Nurses (AACN)

Attachment: degree required certification & renewal fees, renewal requirements, accreditation & affiliation and testing services.

RESOURCES:

American Academy of Nurse Practitioners National Certification Program (AANPCP)

<https://www.aanpcert.org/ptistore/control/index>

[http://www.aanpcert.org/ptistore/resource/documents/2013%20CandidateRenewalHandbook%20-Rev%2011%2025%202013%20forNCCA\(FINAL\).pdf](http://www.aanpcert.org/ptistore/resource/documents/2013%20CandidateRenewalHandbook%20-Rev%2011%2025%202013%20forNCCA(FINAL).pdf)

<http://www.aanpcert.org/ptistore/control/recert/qualifications>

American Nurses Credentialing Center (ANCC)

<http://www.nursecredentialing.org/Certification>

<http://www.nursecredentialing.org/AcuteCareNP-Eligibility.aspx>

<http://www.nursecredentialing.org/RenewalRequirements.aspx>

Pediatric Nursing Certification Board (PNCB)

<http://www.pncb.org/ptistore/control/exams/cpen/fees>

http://www.pncb.org/ptistore/control/resource/content/certs/PC_CPNP_Recert_Guide.pdf

http://www.pncb.org/ptistore/control/about/about_exams

National Certification Corporation for the Obstetric, Gynecologic and Neonatal Nursing Specialty (NCC)

<http://www.nccwebsite.org/resources/docs/2013-exam-core.pdf>

<http://www.nccwebsite.org/resources/docs/2014-exam-np-bc.pdf>

<https://www.nccwebsite.org/resources/docs/2014-maintenance-core.pdf>

<http://www.nccwebsite.org/Certification/HowdoIapply.aspx#how-computer-testing-works>

American Association of Critical-Care Nurses (AACN)

<http://www.aacn.org/wd/certifications/content/initial-acnpc-certification.pcms?menu=certification>

<http://www.aacn.org/wd/Certifications/Content/ccrnrenewal.pcms?menu=Certification>

<http://www.aacn.org/wd/certifications/docs/acnpc-renewal-handbook.pdf>

https://www.pncb.org/ptistore/control/resource/content/certs/CPN_Recert_Guide.pdf

<http://www.aacn.org/wd/certifications/content/certcorpinfo.pcms?menu=certification&lastmenu=>

<http://www.aacn.org/wd/certifications/docs/cert-policy-hndbk.pdf>

No public comment and no motion required.

10.2 *Information Only:* Business and Professions Code Section § 2725.4 Abortion by aspiration techniques; Requirements

Curriculum, Training Plan, and Core Competencies for NPs and CNMs to perform abortion by aspiration technique: Section 2725.4 to Business and Professions Code, Nursing Practice Act. (HWPP-171)

BACKGROUND:

Business and Professions Code Section 2725.4 Abortion by aspiration techniques; effective January 1, 2014 was the result of HWPP #171 nurse practitioners (NPs), certified nurse-midwives (CNMs), and physician assistants (PAs) can now provide comprehensive first trimester aspiration abortion care in California.

As part of HWPP #171, ANSIRH (Advancing New Standards in Reproduction Health) researchers evaluated a standardized competency-based curriculum and training plan for education of primary care clinicians in early abortion care. The curriculum and training plan consists of didactic education, problem-based case reviews, and “hands on” clinical experience, along with knowledge testing and periodic clinical assessment, with the goal to train primary care clinicians to competence in all aspects of early aspiration abortion care. Go to ANSIRH website for their information:

<http://www.ansirh.org/research/pci/hwpp/hwpp-curriculum-and-competency-resources.php>

Public comment received by a woman who did not identify herself.

No motion required.

10.3 Information Only: Updating Frequently Asked Questions Regarding Nurse Practitioner Practice

BACKGROUND:

The Frequently Asked Questions Regarding Nurse Practitioner Practice updated to include current law and regulation changes that have occurred since the last update 12/2004. This will include updates to the Nursing Practice Act including Section 2725 for example , Section 2725.2 Dispensing of self-administered hormonal contraceptives; Injections; Standardized Procedures. Section 2725.4 Abortion by aspiration techniques; Requirements. NP 2835.7 Authorized Standardized Procedure for ordering durable medical equipment, certifying disability in consultation with the physician pursuant to Unemployment Insurance Code, and plan of treatment or plan of care for home health in consultation with the physician. Other related legislated changes that relate to nurse practitioner practice.

No public comment and no motion required.

10.4 Information Only: Nurse Practitioner Laws and Regulations-Title 16 of the California Code of Regulation, Article 8, 1480-1484

Nursing Education Consultant APRN (Advanced Practice Registered Nurse) Workgroup suggested updating and revision of:

1. Section 1480 — Definitions
2. Section 1481 — Categories of Nurse Practitioners
3. Section 1482 — Requirements for Nurse Practitioner
4. **Grandfathering clause added for CNP**
5. Section 1483 — Evaluation of Credentials
6. Section 1483.1 — Approved APRN-NP Program Accreditation Required and

Board Notification Process

- 7. Section 1483.2 — Application for APRN-NP Program Approval
- 8. Section 1483.3 — Changes to an Approved Program
- 9. Section 1484 — APRN-NP Education
- 10. Section — Clinical Practice Experience for Nurse Practitioner Student Enrolled in Out-of- State Based APRN-NP Programs

BACKGROUND:

Grandfathering will be in accord with Section 2835.5 Submission of credentials; issuance of certificate, Persons already found qualified. Section 2836.5 (c), (d), (1), (2), (3).

Draft regulations for discussion last updated on 7/27/2014 include the grandfathering clause for CNP is on page 7 of 21.

The BRN staff APRN workgroup has continued review of Article 8, Nurse Practitioner Laws and Regulation, the NCSBN Model Act, and language implemented by other states. The attached from the workgroup is the current working document which includes the existing regulations and draft suggested language. At the May 7, 2014 committee meeting an un-numbered section called work in progress-Requirements for Clinical Practice Experience for Nurse Practitioner Students Enrolled in Out-of- State Based APRN-NP program was included. SNEC identified that BRN learns about out-of-state schools when NP nursing students are applying for certification in CA. There is interest to have the out-of-state NP educational programs identified to the BRN.

No public comment and no motion required.

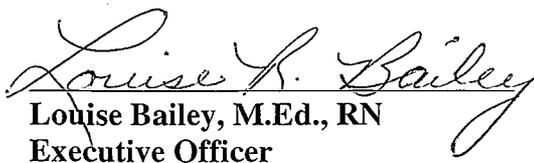
11.0 Public Comment for Items Not on the Agenda

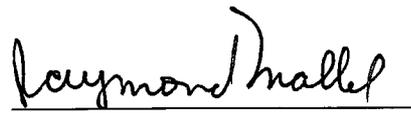
Public comments:

Katherine Hughes, SEIU National Nurse Alliance
Jeannie King, SEIU Nurse Alliance of California

12.0 Adjournment

The meeting adjourned at 3:41 pm.


Louise Bailey, M.Ed., RN
Executive Officer


Raymond Mallel
President