

Agenda Item 7.D.I



BUSINESS, CONSUMER SERVICES AND HOUSING AGENCY • GAVIN NEWSOM, GOVERNOR

Board of Vocational Nursing and Psychiatric Technicians
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DATE	November 12, 2024
TO	Board Members
REVIEWED BY	Judith D. McLeod DNP, CPNP, RN Supervising Nursing Education Consultant (SNEC)
PREPARED BY	Roberta Thomson Ed.D., RN Nursing Education Consultant (NEC)
SUBJECT	Request to Admit Students; Consideration of Removal from the Approved Program List
PROGRAM	Sunrise Nursing School Vocational Nursing Program (Program) (Program Director: Susan White, Shingle Springs, El Dorado County, Private)

Please note: Board Nursing Education Consultants make recommendations. The recommendations are forwarded to the Education and Practice Committee for review and recommendation, or to the Executive Officer or full Board for action.

PROGRAM REQUEST:

Admit a full-time class of 18 students. This would be the second class for this Program. The Program did not submit the request to admit students in writing with required documentation, prior to the 15th day of the second month prior to the Board meeting as required in California Code of Regulations, Title 16, Section 2533.

BACKGROUND:

On January 9, 2024, an unannounced site visit was made to assess the program for compliance with Article 5 of California Code of Regulations, Title 16.

On January 31, 2024, a request to admit students was received from the Program Director with supporting documentation. The supporting documentation was incomplete.

A Notification of Violations was sent to program on March 12, 2024. Responses to the Notification of Violations were received from Program Director on March 18, 2024. The responses were reviewed, and the violations that were not corrected were identified.

On April 18, 2024, there was an updated request to admit a second class of 15 students. Documentation of clinical resources, and adequate faculty information were incorrect, incomplete, and not in final form two months prior to proposed start date.

On April 24, 2024, there was an updated request to admit a second class of 15 students to commence on June 24, 2024. Documentation of clinical resources, the faculty and

facilities assignment form and the enrollment table were returned to the Program Director for needed corrections.

On April 26, 2024, Program Director stated she had submitted a corrected faculty and facilities list and documentation of clinical resources. These have not been received.

On May 7, 2024, the NEC informed the Program Director that without complete, correct documentation two months prior to the proposed start date and insufficient correction of all violations from the January 12, 2024, visit, a staff recommendation to admit a second class could not be made.

On May 24, 2024, the Program Director had not submitted the required documents for a request to admit students, two months prior to the proposed start date. The documentation of clinical resources had not been submitted in final form, complete and with all errors corrected.

On May 27, 2024, a TEAMS meeting was scheduled with the Program Director and the NEC to complete the Documentation of Clinical Resources. The Program Director was unable to share her screen. The NEC's copy was emailed to her following the meeting, with instructions to review the documents and submit it by May 31, 2024.

On May 31, 2024, The Program Director revised her request to admit to 18 full-time students on July 8, 2024, and submitted documentation of clinical resources, an enrollment table and a faculty and facility list to support the request. Documents submitted do not demonstrate adequate resources. The documents were returned for correction.

On June 3, 2024, The Program Director was notified by the Licensing Division that the RONPs for her students that graduated on March 22, 2024, were submitted incorrectly and could not be processed. The forms were returned to the Program Director along with the PowerPoint instructions that were reviewed at the Director Forum on May 8, 2024. It had been 11 weeks since these students graduated from the program and because of the Program Director's error their RONPs had not been processed and there was no projection as to when they would be eligible to schedule their NCLEX-PN®.

On June 6, 2024, documents required for class admission, including documentation of resources, were resubmitted. Corrections were not made, and the revisions made did not demonstrate adequate resources for Term three for Maternity, Pediatrics, Leadership/Supervision or Medical/Surgical Nursing clinical placements or skills.

The following problems have been identified with this Program:

- a. The Program is inactive with no students since March 22, 2024.
- b. Graduates from March 22, 2024, class have been delayed in taking NCLEX-PN® in a timely manner, due to the Program Director's error. The Program Director has delayed in resubmitting the RONPs for the students.

- c. There are violations from January 12, 2024, site visit that have not been corrected.

On August 16, 2024, the Board rendered the following decisions:

- a. Denied the request to admit the Program's second class.
- b. Placed the Program on provisional approval for a period of 2 years commencing on August 16, 2024.

On August 20, 2024, the NEC scheduled biweekly TEAMS meetings with the Program Director to assist with the correction of the outstanding violations, preparation of the required documents for a request to admit students, and review of 55M-2W Instructional Plan, the 55M-2E Summary of Instructional Plan Hours and Content Hour Worksheets. As of September 25, 2024, the Program Director has not submitted any documents in the correct final form.

On September 11, 2024, the Program Director informed the NEC that the school would be moving to a new location closer to Sacramento. The NEC reminded the Program Director that program resources would need to be verified prior to commencing classes at a new location. A virtual walk through would need to be scheduled.

On September 14, 2024, The Program Director submitted the Annual Report (July 1, 2023 – June 30, 2024). On September 17, 2024, the NEC requested that the Program Director review and resubmit the Annual Report due to the number of missing items and errors in the document and resubmit by September 24, 2024.

On September 18, 2024, Program Director informed the NEC that she would be on vacation for one month beginning on October 15, 2024.

On September 25, 2024, the Program Director failed to submit any corrected documents. Evaluation tools submitted for the Evaluation of Methodology of Clinical Facilities and the Evaluation Methodology for Curriculum were obtained from the internet and were not applicable for evaluation of the Program. For example, the tool to evaluate the program by the facility was a social work program field work evaluation. The NEC postponed the weekly meeting for document review until corrected documents were submitted by the Program Director.

STAFF ANALYSIS:

The Program did not demonstrate compliance with Article 5 of California Code of Regulations, Title 16, due to the four violations that were identified and are not corrected.

Submitted documentation by the Program Director does not substantiate adequate resources including faculty and clinical facilities for students to achieve programmatic learning objectives.

STAFF RECOMMENDATIONS:

1. Deny the Program’s request to admit a second class.
2. Remove the Program from the Board approved program list.

REQUIRED PROGRAM VISIT

Required compliance with the California Code of Regulations, Title 16, Section 2526(c) states:

A Board representative shall make a survey visit prior to graduation of the initial class. A program shall not commence another class without prior Board approval.

The Sunrise School of Nursing Vocational Nursing Program was reviewed to determine compliance with Article 5 of the California Code of Regulations, Title 16. The findings are seen within the table below. Ten violations were identified, and six violations were corrected. Four Violations have not been corrected since March 2024.

ARTICLE 5 – SCHOOLS OF VOCATIONAL NURSING	VIOLATIONS
2526. Procedure for Approval	
1-4 Program Application Information	
5. Disciplinary History	
1. Organizational Chart	
2. Geographic Narrative	
3. Philosophy of Program	
4. Conceptual Framework	
5. Clinical Facility Placement	
6. Terminal Objectives	
7. Course Outlines for Each Course	
8. Instructional Plan	X
9. Daily Lesson Plans	X
10. Evaluation Methodology for Curriculum	X
11. Verification of Faculty Qualifications	
12. Evaluation Methodology for Clinical Facilities	X

13. Admission Criteria	
14. Screening and Selection Criteria	
15. Student Services List	
16. Number of Students	
17. Evaluation Methodology for Student Progress	
18. Remediation	
19. Attendance Policy	
20. Grievance Policy	
21. Required Notices (Contacting Board, Grievance Policy, credit granting, a list of approved clinical facilities)	
22. Credit Granting	
23. Transfer Credit	
24. Competency Based Credit	
25. Program Resources	
26. Faculty Meeting Minutes	
27. Education Equivalency (High School Graduation)	
28. Program Hours	
29. Preceptorship	
30. BPPE Approval (Private School Only)	
31. Fee Reduction request (if applicable)	
2527. Reports	
2529. Faculty Qualifications	
2530. General Requirements	
2532. Curriculum Hours	
2533. Curriculum Content	
2534. Clinical Experience	
2535. Credit for Previous Education and Experience	

RELEVANT PROGRAM ELEMENTS

Enrollment

California Code of Regulations, Title 16, Section 2530(k) states:

The program shall have prior Board approval to increase the number of students per class and/or increase the frequency of admission of classes. Criteria to evaluate a school's request to increase the number of students per class and/or increase the frequency of class admissions include but are not limited to: (1) Sufficient program resources as specified in Section 2530(a). (2) Adequacy of clinical experience as specified in Section 2534. (3) Licensure examination pass rates as specified in Section 2530(l).

The Program is approved to offer a 42-week full-time class. Board approval is required prior to the admission of each class.

The following table represents current and projected student enrollment based on current and proposed class starts and completion dates. The table indicates a maximum enrollment of 18 students at a future date.

ENROLLMENT DATA TABLE

Class Start Dates	Class Completion Dates	Number of Students Admitted	Number of Students Current	Number of Graduated	Total Enrolled
3/31/2023 *3/22/2024		9	9		9
	3/22/2024 (3/31/2023)			-9	9 - 9 = 0
No date requested *Proposed		18			18

*Indicates projected graduation date

Licensing Examination Statistics

California Code of Regulations, Title 16, Section 2530(l) states:

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

The following statistics, furnished by Pearson Vue and published by the National Council of State Boards of Nursing as "Jurisdictional Summary of All First-Time Candidates Educated in Member Board Jurisdiction," for the period July 2024 through

September 2024, specify the pass percentage rate for graduates of the Program on the National Council Licensure Examination for Practical/Vocational Nurses (NCLEX-PN®) and the variance from the state average annual pass rates.

NCLEX-PN® LICENSURE EXAMINATION DATA

Quarterly Statistics					Annual Statistics		
Quarter	# Candidates in Quarter	# Passed in Quarter	% Passed in Quarter	State Quarterly Pass Rate	Program Average Annual Pass Rate	State Average Annual Pass Rate CCR §2530(l)	Variance from State Average Annual Pass Rate
Jul – Sep 2024	4	2	50%	83%	50%	85%	-35

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

Based on the most current data available (July – September 2024), the Program’s average annual pass rate is 50 percent. The California average annual pass rate for graduates from approved vocational nursing programs who took the NCLEX-PN® for the first time during the same period is 85 percent. The average annual pass rate for the Program is 35 percentage points below the state average annual pass rate.

Faculty and Facilities

California Code of Regulations, Title 16, Section 2534(d) states:

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

The current number of approved faculty totals three, including the Program Director. The Program Director has 50 percent administrative duties and 50 percent teaching responsibilities. Of the total faculty, two are designated to teach clinical. Based upon a maximum proposed enrollment of 18 students, two instructors are required for clinical supervision. The utilization of faculty at clinical facilities is such that clinical instruction is covered adequately. The program has not been in operation since March 2024, and the NEC is unable to substantiate that approved faculty are still available, as the program has not submitted verifiable paperwork.

California Code of Regulations, Title 16, Section 2534(b) states:

Schools shall have clinical facilities adequate as to number, type, and variety of patients treated, to provide clinical experience for all students in the areas specified by Section 2533. There must be available for student

assignment, an adequate daily census of patients to afford a variety of clinical experiences consistent with competency-based objectives and theory being taught.

Submitted documentation indicates the Program does not have sufficient clinical facilities to afford the number, type and variety of patients that will provide clinical experience consistent with approved competency-based objectives and theory being taught for the current and proposed student enrollment.

Violations

California Code of Regulations title 16, section 2526(j)(1) requires an institution, as a condition for the continued approval of a postsecondary school or educational program offering a course of instruction in vocational nursing, to submit a completed "Continuing Approval Application for a Vocational Nursing School or Program," Form 55M-15 (New 04/2022), the requirements of which are incorporated by reference into the section.

Violation #1

Form 55M-15, at Section 13 on page 5: Instructional Plan requires the institution to submit a complete instructional plan, on the form 55M-2W (New 04/2022) which documents that correlates theory and clinical content and hours on a weekly basis and provides an overview of the teaching schedule; the document shall commit to curriculum in which theory hours precede clinical hours.

Violation: On March 12, 2024, the Program Director Submitted the instructional plan for terms 2 and 3 which were not on the prescribed form 55M-2W. The Program Director submitted an updated instructional plan on May 18, 2024, which continues to fail to follow the prescribed format. The content hour column was also not complete. The Program Director submitted the Instructional Plan form 55M-2W five times between April 14 and September 26, 2024, and none of the documents were in their complete and final form. The hours on the Summary of Instructional Plan Hours (55M-2E) and the Content Hour Worksheets do not match and they are different from the Instructional Plan.

Status: The violation is **not** corrected

Violation #2

Form 55M-15, at Section 14 on page 5: Daily Lesson Plans, requires the institution to attach copies of daily lesson plans for courses of instruction in the following subjects (for theory and skills): diabetes, fundamentals, pediatrics, leadership, and maternity. A daily lesson plan is a document that correlates the theory and practice for each instruction day for the instructor to follow.

Violation: On March 12, 2024, the Program Director submitted daily lesson plans that did not meet the standard for a daily lesson plan. The Program Director submitted daily lesson plans three times between April 14 and September 26, 2024. Explanations were given on dates, as to the format and information that is needed to make the daily lesson plans usable. Daily Lesson Plans that meet requirements have not been submitted.

Status: The violation is **not** corrected

Violation #3

Form 55M-15, at Section 15 on page 5: Evaluation Methodology for Curriculum, requires the institution to submit an explanation of the process that identifies the method(s) by which the curriculum is evaluated regularly. Submit complete unredacted curriculum reviews based on your stated methodology. The reviews should cover the period since the initial approval as a sample size.

Violation: On March 4, 2024, the Program Director submitted a document that addressed monitoring the instructors to ensure the approved curriculum is being taught and the school schedule is being followed, including implementation of training in the use of the instructional plan. The methodology does not address evaluation of the curriculum or provide any unredacted curriculum reviews. The Program Director submitted an evaluation methodology for curriculum on May 21, 2024, which did not provide any unredacted curriculum reviews. Previously requested corrections were not made. A classroom observation tool was submitted for curriculum evaluation, but the tool evaluated the teacher, not the curriculum.

On August 28, 2024, the NEC provided a tutorial for the Program Director on Developing Evaluation Methodology of Clinical Facilities and Curriculum. The TEAMS meeting was 90 minutes in length. The SNEC was in attendance. The Program Director was provided opportunities to ask questions. The Program Director stated she understood. A written guide was provided following the meeting.

A second meeting was held on September 11, 2024. Documents were submitted on the morning of the meeting. The documents were not prepared according to the instruction from the previous meeting.

Status: The violation is **not** corrected

Violation # 4

Form 55M-15, at Section 17 on page 6: Evaluation Methodology for Clinical Facilities Attach an explanation of the process for evaluating clinical facilities, including identification of the tool(s) used by the program to evaluate the clinical facilities), e.g., surveys, forms, checklists.

Violation: On March 4 the Program Director submitted the methodology for evaluation of clinical facilities that included items that are outside the jurisdiction of a program using the facility to train vocational nursing students. Unredacted evaluations of clinical facilities by the Program Director, faculty, and students were not submitted. The Program Director submitted an updated evaluation methodology for clinical facilities on May 21, 2024. The document was dated January 21, 2024. Unredacted evaluations of clinical facilities by the Program Director, faculty, students, and facility staff were not included. Evaluation tools as described in the methodology were not submitted.

Status: The violation is **not** corrected

ATTACHMENTS:

Attachment A: Program History

SUNRISE SCHOOL OF NURSING VOCATIONAL NURSING PROGRAM

Program History

- On November 1, 2022, the Executive Officer rendered the following decisions:
 1. Granted initial approval to the Sunrise School of Nursing Vocational Nursing Program for the four-year period beginning November 1, 2022, and issued a certificate accordingly.
 2. Required the Program to obtain prior approval before admission of the initial class of students into the Program.
 3. Approved the Program's 42-week full-time curriculum, two 15-week terms and one 12-week term of 1584 hours, including 618 theory hours and 966 clinical hours.
 4. Required the Program to comply with all requirements listed below.

PROGRAM REQUIREMENTS

1. Required the Program to obtain prior BVNPT approval before admission of the initial class of students.
 2. The Program is highly recommended to obtain full approval of the VN Program by the BPPE prior to requesting the first class of students.
 3. The Program Director documents that adequate resources, i.e., faculty and facilities, are available to support the proposed class of students.
 4. Board staff will monitor the Program by tracking its licensure examination pass rate each quarter, the number of graduates taking the licensure examination, reviewing Annual Reports submitted by the Program Director, and conducting Program Record Surveys.
 5. Require the Program to comply with all approval standards in Article 4 of the Vocational Nursing Practice Act, commencing at California Business and Professions Code Section 2880, and Article 5 of the California Code of Regulations, Title 16 commencing with Section 2525.
- On January 14, 2023, the Program provided the Letter from the Bureau of Private Postsecondary Education identifying the Program as approved.
 - On January 14, 2023, the NEC received a request to admit students from the Program Director with supporting documentation.
 - On January 12, 2024, an unannounced visit was made to the campus as required by California Code of Regulations, Title 16, Section 2526(c).

- On January 31, 2024, a request to admit students was received from the Program Director with supporting documentation. The supporting documentation was incomplete.
- On March 12, 2024, a Notification of Violations was sent to program.
- On March 18, 2024, a response to the Notification of Violations was received from Program Director. The response was reviewed, and the violations that were not corrected were identified.
- On April 18, 2024, there was an updated request to admit a second class of 15 students. Documentation of clinical resources, and adequate faculty information were incorrect, incomplete, and not in final form two months prior to proposed start date.
- On April 24, 2024, there was an updated request to admit a second class of 15 students to commence on June 24, 2024. Documentation of clinical resources, the faculty and facilities assignment form and the enrollment table were returned to the Program Director for needed corrections.
- On April 26, 2024, Program Director stated she had submitted a corrected faculty and facilities list and documentation of clinical resources. These have not been received.
- On May 7, 2024, the NEC informed the Program Director that without complete, correct documentation two months prior to the proposed start date and insufficient correction of all violations from the January 12, 2024, visit, a staff recommendation to admit a second class could not be made.
- On May 24, 2024, the Program Director had not submitted the required documents for a request to admit students, two months prior to the proposed start date. The documentation of clinical resources had not been submitted in final form, complete and with all errors corrected.
- On May 27, 2024, a TEAMS meeting was scheduled with the Program Director and the NEC to complete the Documentation of Clinical Resources. The Program Director was unable to share her screen. The NEC's copy was emailed to her following the meeting, with instructions to review the documents and submit it by May 31, 2024.
- On May 31, 2024, The Program Director revised her request to admit to 18 full-time students on July 8, 2024, and submitted documentation of clinical resources, an enrollment table and a faculty and facility list to support the request. Documents submitted do not demonstrate adequate resources. The documents were returned for correction.
- On June 3, 2024, The Program Director was notified by the Licensing Division that the RONPs for her students that graduated on March 22, 2024, were submitted incorrectly and could not be processed. The forms were returned to the Program Director along with the PowerPoint instructions that were reviewed at the Director Forum on May 8, 2024. It has been 11 weeks since these

students graduated from the program and because of Program Director's error their RONPs have not been processed and there is no projection as to when they will be eligible to schedule their NCLEX-PN®.

- On June 6, 2024, documents were resubmitted. Corrections were not made, and the revisions made do not demonstrate adequate resources for Term three for Maternity, Pediatrics, Leadership/Supervision or Medical/Surgical Nursing clinical placements or skills.
- On June 11, 2024, the following decisions were rendered by the Executive Officer
 1. Deny Program's request to admit the second program class of 18 students to commence July 8, 2024, with a graduation date of May 9, 2025, to replace the class that graduated on March 22, 2024.
 2. Refer the Program to the full Board on the August 16, 2024, for consideration of removal from the Board approved program list.
 3. Require the Program to comply with all requirements listed below.

PROGRAM REQUIREMENTS

1. Require all violations be corrected and all corrected documents be submitted to the NEC by June 30, 2024
2. Notify the NEC in the event a current class is displaced from clinical sites. Obtain BVNPT approval prior to admission of each class.
3. Continue to require the Program, when requesting approval to admit students, to:
 - a. Submit all documentation in final form, using forms provided by the BVNPT, no later than two months prior to the requested start date for the class.
 - b. Provide documentation that adequate resources, i.e., faculty and facilities, are available to support each admitted class of students.
 - c. Maintain an average annual pass rate that is compliant with the California Code of Regulations, Title 16, Section 2530(I).
4. Comply with all of the approval standards set forth in Article 4 of the Vocational Nursing Practice Act, commencing with California Business and Professions Code Section 2880, and in Article 5 of the California Code of Regulations, Title 16, commencing with Section 2525.

5. Board staff will continue to monitor the Program's effectiveness by tracking class admissions, the effectiveness of employed interventions, and the Program's licensure examination pass rates each quarter.
- On August 16, 2024, the Board rendered the following decisions:
 1. Denied the Program request to admit a second class for the Program.
 2. Placed the Program on Provisional approval for a period of two years beginning August 16, 2024.
 3. Required the Program to comply with all requirements listed below.

PROGRAM REQUIREMENTS

1. Required that the Program Director allocate at least 50% of her time to the active administration of the Program.
2. The Program will submit corrections for the four remaining violations on or before October 15, 2024.
3. Required the Program to submit a comprehensive analysis report in three months, with a submission date no later than November 15, 2024, in nine months, no later than April 15, 2025, 15 months no later than November 15, 2025, and 21 months no later than May 15, 2026. The report must include a comprehensive analysis of the Program, timeline for implementation, and the effect of employed interventions. The following elements must be addressed in the analysis.
 - a. Terminal Objectives
 - b. Evaluation of Current Curriculum including:
 - 1- Instructional Plan
 - 2- Daily Lesson Plans for each Term
 - c. Student Policies including:
 - 1- Admission Criteria
 - 2- Screening and Selection Criteria
 - 3- Attendance Policy
 - 4- Remediation Policy
 - 5- Evaluation Methodology for Student Progress including evaluation of clinical practice.
 - 6- Credit Granting Policy
 - 7- Evaluation Methodology for Curriculum
 - 8- Evaluation Methodology for Facilities
 - d. Evaluations of approved clinical facilities which determine adequacy in number and variety of patients to accommodate current and projected student enrollment.

- e. Faculty Meeting Methodology
 - f. Documentation of resources, including faculty and facilities, for all terms for all current cohorts.
4. Admit no additional classes without prior approval by the Board.
 5. Required the Program, when requesting approval to admit students, to:
 - a. Submit all documentation in final form, using the forms provided by the BVNPT, no later than by the fifteenth day of the second month preceding the month of the Board meeting.
 - b. Provide documentation that adequate resources, i.e., faculty and facilities, are available to support each admitted class of students.
 - c. Ensure that the Program maintains an average annual pass rate that is compliant with the California Code of Regulations, Title 16, Section 2530(l).
 6. Provide a maximum of ten students for each instructor. The California Code of Regulations, Title 16, Section 2534(d) states: “for supervision of clinical experience, there shall be a maximum of 15 students for each instructor.” Recommendation of one instructor for a maximum of ten students in clinical experiences will enable more focused instruction and enhanced learning to closely monitor and evaluate the clinical performance of students.
 7. Notify the NEC in the event a current class is displaced from clinical sites.
 8. Continued the Program’s requirement to comply with all the approval standards in Article 4 of the Vocational Nursing Practice Act, commencing with California Business and Professions Code, Section 2880, and in Article 5 of the California Code of Regulations, Title 16, commencing with Section 2525.
 9. The Program is required to demonstrate compliance with NCLEX-PN[®] licensure examination pass rates each quarter while on provisional approval.