BOARD OF REGISTERED NURSING
EDUCATION/LICENSED COMMITTEE MINUTES

DATE: January 11, 2018

TIME: 0900

LOCATION: Department of Consumer Affairs-HQ2
1747 N. Market Blvd. Hearing Room
Sacramento, CA 95834

PRESENT: Michael Jackson, MSN, RN, Chairperson
Pilar De La Cruz-Reyes, MSN, RN
Donna Gerber

STAFF PRESENT: Stacy Berumen, AEO; Janette Wackerly, SNEC; Badrieh Caraway, SNEC;
Carol Velas, NEC; Katie Daugherty, NEC; Susan Engle, NEC; Lori Chouinard, NEC; Wayne Boyer,
NEC

7.0 CALL TO ORDER/ROLL CALL/ESTABLISHMENT OF A QUORUM
Michael Jackson called the meeting to order at 9:14 am and a quorum was established with all Committee
members present.

7.0.1 VOTE ON WHETHER TO APPROVE MINUTES
➢ October 4, 2017

ACTION: The minutes of the October 4, 2017 meetings were approved as presented.

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<th>Motion: Pilar De La Cruz-Reyes</th>
<th>Second: Donna Gerber</th>
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Public Input: None.

7.1 VOTE ON WHETHER TO RECOMMEND RATIFICATION OF MINOR CURRICULUM
REVISION

7.1.1 California State University Chico Baccalaureate Degree Nursing Program
7.1.2 Chamberlain University, College of Nursing Baccalaureate Degree Nursing Program
7.1.3 Holy Names University Baccalaureate Degree Nursing Program
7.1.4 National University Baccalaureate Nursing Program
7.1.5 Butte College Associate Degree Nursing Program
7.1.6 California Career College Associate Degree Nursing Program
7.1.7 Career Care Institute Associate Degree Nursing Program
7.1.8 College of the Sequoias Associate Degree Nursing Program
7.1.9 Copper Mountain College Associate Degree Nursing Program
7.1.10 Cuesta College Associate Degree Nursing Program
7.1.11 Glendale Career College Associate Degree Nursing Program
7.1.12 Los Angeles Southwest College Associate Degree Nursing Program
7.1.13 Santa Barbara City College Associate Degree Nursing Program
7.1.14 Weimar Institute Associate Degree Nursing Program
7.1.15 California State University Dominquez Hills Advanced Practice Nursing Program

Acknowledgment Receipt of Program Progress Report:
7.1.16 University of Phoenix, Modesto LVN to BSN Program
7.1.17 College of the Sequoias Associate Degree Nursing Program
7.1.18 East Los Angeles College Associate Degree Nursing Program
7.1.19 Unitek College Associate Degree Nursing Program
7.1.20 UC Davis Betty Irene Moore School of Nursing Master’s Entry Nursing Program

ACTION: Ratify Minor Curriculum Revisions and Acknowledge Receipt of Program Progress Reports as presented.

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Public Input: None.

7.2 VOTE ON WHETHER TO RECOMMEND CONTINUATION OF APPROVAL OF PRELICENSURE NURSING PROGRAM

7.2.1 California State University, Channel Islands Baccalaureate Degree Nursing Program
Lynette Landry PhD, MSN, is the Chair of the Nursing Program.

A regularly scheduled continuing approval visit was conducted on October 9 and 10, 2017 by Nursing Education Consultants, Loretta Melby and Katie Daugherty. The program received a non-compliance in Section 5: Curriculum 1425.1 (d) Each faculty member shall be clinically competent in the nursing area in which he or she teaches. The program was found to be in compliance with all other BRN regulations. One recommendation was written regarding Section 1: Program Director/ Assistant Director 1424 (e) The director and the assistant director shall dedicate sufficient time for the administration of the program. In 2016 the Geriatric content was integrated throughout the Medical/Surgical courses and a plan was put in to place to have all faculty remediated by July 2017. In September 2017 all faculty were remediated and submitted for BRN approval. This appropriately addressed the above noncompliance. When meeting with the university administration they expressed a strong commitment to the nursing program’s continued success and were knowledgeable of the strengths and challenges experienced by the nursing program. They agreed to evaluate and address the release time for the Director and Assistant Director to address the needs of the students and faculty at both campuses.

ACTION: Continue approval of California State University, Channel Islands Baccalaureate Degree Nursing Program.

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<th>Motion: Michael Jackson</th>
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Public Input: None.

7.2.2 California State University, Long Beach Baccalaureate Degree Nursing Program
Dr. Loucine Huckabay has served as program director since 2001.

On September 19 - 21, 2017 a continuing approval visit was conducted at California State University Long Beach College for the review of their Nursing Program. This visit was performed by Dr. Linda Sperling and Dr. Carol Velas, NECs. The program was found to have one area of non-compliance and three recommendations. The area of non-compliance was given related to 1426(a) Curriculum. The School of Nursing was mandated in 2012 to reduce the unit load to 120 units from 137 units. This
included a realignment of the program content within the courses that would appropriately change the student/learner outcomes for those modified courses and course renaming. The new curriculum was phased in beginning Fall 2013. The program failed to provide notification to the BRN regarding these changes to the Curriculum. This has since been resolved with a Major Curriculum Revision submitted at the time of the visit.

**ACTION:** Continue approval of California State University, Long Beach Baccalaureate Degree Nursing Program.

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Public Input: None.

7.2.3 California State University, San Bernardino Baccalaureate Degree Nursing Program

Evangeline Fangonil-Gagalang, MSN, RN is Director of the CSUSB BSN program on both the main campus in San Bernardino and the Palm Desert campus.

On October 23-25, 2017, Badrie Caraway and Laura Shainian, NECs, conducted a continuing approval visit at CSUSB, BSN program. The BSN degree nursing program was found to be in compliance with all BRN rules and regulations. Two recommendations were made to strengthen the curriculum: CCR Section 1424 (b) (1)- Total Program Evaluation, and CCR Section 1426 (d) Curriculum.

**ACTION:** Continue approval of California State University, San Bernardino Baccalaureate Degree Nursing Program.

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Public Input: None.

7.2.4 The Valley Foundation School of Nursing Baccalaureate Degree Nursing Program

Dr. Colleen O’Leary-Kelley was appointed Program Director of the Valley Foundation School of Nursing at San Jose State University (TVFSON) on June 1, 2017. Prior to her appointment, Dr. Katherine Abriam-Yago was the program director from 2013-2017. Dr. Abriam-Yago has been available throughout this transition period.

A regularly scheduled continuing approval visit was performed on October 24-25, 2017 by Carol A. Velas, NEC and Janette Wackerly, SNEC. The program was found to be in full compliance with all BRN rules and regulations, three recommendations were given Section 2: Total Program Evaluation and Section 3: Sufficiency of Resources. The total program evaluation has components of an evaluation plan but lacks the process for full implementation. The program has insufficient space to assess students as a cohort and must test students by splitting the cohort into two. There is potential for a break in exam security with this process. Both Program Director and Assistant Director are newly appointed. The Assistant Director has 25% release time to support the Program Director in the administration of the program. Immediate work on the Total Program Evaluation Plan and a proposed Major Curriculum revision as well as management of this program require an increase in this release time. See Consultant’s Report for details. The Program has submitted an action plan for the recommendations and is included in the material.

**ACTION:** Continue approval of The Valley Foundation School of Nursing Baccalaureate Degree Nursing Program.

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Public Input: None.
7.2.5 Allen Hancock College Associate Degree Nursing Program
Daphne Boatright, BSN, MEd, RN, has been the Director of the Associate Degree Nursing Program since 2007.
A continuing approval visit was conducted at the Allan Hancock College (AHC) Associate Degree Nursing Program by Wayne Boyer, NEC on October 24 and 25, 2017. The program was found to be in compliance with all BRN rules and regulations. Two (2) recommendations were given related to 1424(d); 1) establish a plan for funding of adequate support staff such as the program technician, skills lab coordinator, simulation coordinator, clerical support, and counselor for nursing 2) establish a plan to ensure that full-time faculty vacancies will be filled in a timely manner to ensure program objectives are met. One recommendation was given related to 1424(b); review and update total program evaluation tools to benchmarks and better describe actions and evaluation for identified problems.
ACTION: Continue approval of Allen Hancock College Associate Degree Nursing Program.

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Public Input: None.

7.2.6 American River College Associate Degree Nursing Program
Susan Peterson MSN, RN Interim Director.
A regularly scheduled continuing approval visit was conducted December 5-7, 2018 by Nursing Education Consultants Susan Engle and Shelley Ward. The program was found to be compliant with the regulations for pre-licensure nursing programs. Three recommendations were made in CCR section 1424. Administration and Organization of The Nursing Program subsections (b) the policies and procedures by which the program is administered shall be in writing, shall reflect the philosophy and objectives of the program, and shall be available to all students. (1) the nursing program shall have a written plan for evaluation of the total program, including admission and selection procedures, attrition and retention of students, and performance of graduates in meeting community needs; (d) the program shall have sufficient resources, including faculty, library, staff and support services, physical space and equipment, including technology, to achieve the program's objectives; (e) The director and the assistant director shall dedicate sufficient time for the administration of the program; (g) Faculty members shall have the primary responsibility for developing policies and procedures, planning, organizing, implementing and evaluating all aspects of the program and section 1428. Student Participation. Students shall be provided opportunity to participate with the faculty in the identification of policies and procedures related to students including but not limited to:
(a) Philosophy and objectives;
(b) Learning experience; and
(c) Curriculum, instruction, and evaluation of the various aspects of the program, including clinical facilities.
ACTION: Continue approval of American River College Associate Degree Nursing Program.

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Public Input: None.

7.2.7 College of the Sequoias Associate Degree Nursing Program
Belen Kersten, MSN, RN appointed Director November 1, 2013.
A regularly scheduled continuing approval visit was conducted at College of the Sequoias by Susan C. Engle, Nursing Education Consultant November 13-15, 2017. The program was found to be compliant with Article 5 Prelicensure Nursing Programs and three recommendations were made as follows: CCR
1424. Administration and Organization of the Nursing Program (e) The director and the assistant director shall dedicate sufficient time for the administration of the program; (d) The program shall have sufficient resources, including faculty, library, staff and support services, physical space and equipment, including technology, to achieve the program's objectives and 1426. Required Curriculum (a) The curriculum of a nursing program shall be set forth in this section, and shall be approved by the board. Any revised curriculum shall be approved by the board prior to its implementation.

**ACTION:** Continue approval of College of the Sequoias College Associate Degree Nursing Program.

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Public Input: None.

7.2.8 Ohlone College Associate Degree Nursing Program

Sally Scofield MSN, RN, CNE appointed director April 2012.

A regularly scheduled continuing approval visit was conducted October 5-6, 2017 by Susan C. Engle, Nursing Education Consultant. The program was found to have one area of non-compliance CCR 1424. Administration and Organization of the Nursing Program (e) The director and the assistant director shall dedicate sufficient time for the administration of the program and one recommendation CCR 1426. Required Curriculum. (f) The program shall have tools to evaluate a student's academic progress, performance, and clinical learning experiences that are directly related to course objectives. The action taken to correct the area of non-compliance and address the recommendation is found in the Report of Findings.

**ACTION:** Continue approval of Ohlone College Associate Degree Nursing Program.

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Public Input: None.

7.2.9 Ventura College Associate Degree Nursing Program

Sandra Melton, PhD, RN, is the Program Director.

A regularly scheduled continuing approval visit was conducted on September 11-12, 2017, by Laura Shainian, NEC and Katie Daugherty, NEC. The program was found to be in non-compliance in one area: CCR 1424(e) Program Director/Assistant Director. Two recommendations were given: CCR 1424(d) Sufficiency of Resources, and CCR 1426(a) Curriculum. The program director’s (PD) release time to administer the program was reviewed by the college. Changes have been made to ensure adequate time set aside for the administration of the RN program which included regaining PD release time allocated for other programs (i.e. CNA/HHA), having additional help from a faculty member, and an increase in contracted months/hours for the PD.

**ACTION:** Continue approval of Ventura College Associate Degree Nursing Program.

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Public Input: None.

7.2.10 Santa Ana College Associate Degree Nursing Program

Becky Miller, MSN, RN, Associate Dean of Health Sciences/Nursing has served as the program director since July 1, 2005.

On December 6 and 7, 2017, Dr. Linda Sperling and Badrieh Caraway, SNEC conducted the regularly scheduled continuing approval visit at Santa Ana College (SAC). The program was found to be in
compliance with Board rules and regulations. SAC has consistently demonstrated excellence as a pre-licensure RN nursing education program over the years and the site visit evidence validates the program’s ability to sustain the educational rigor while being committed to student success under the able leadership of program director, Becky Miller, MSN, RN, and committed faculty members.

**ACTION:** Continue approval of Santa Ana College Associate Degree Nursing Program.

**Motion:** Michael Jackson

**Second:** Pilar De La Cruz-Reyes


**Public Input:** None.

**7.3.0 VOTE ON WHETHER TO RECOMMEND CONTINUATION OF APPROVAL OF PRELICENSURE NURSING PROGRAM**

**7.3.1 American University of Health Sciences Baccalaureate Degree Nursing Program**

Myrna Dial, PhD, RN, Dean, School of Nursing is the Program Director and represented the program.

Dr. Myrna Dial, Sue Morrison, and Dr. Scott Amundsen, Provost represented the program.

Badrieh A. Caraway, Supervising Nursing Education Consultant presented the report. A regularly scheduled continuing approval visit was conducted January 25-26, 2017 by NECs Wayne Boyer and Leslie A. Moody. The program was found to be in noncompliance with CCR 1424(d) sufficiency of resources, and recommendations were written regarding CCR 1425.1(b) orientation of faculty and CCR 1428 student participation. At the ELC meeting in May 2017, recommendation was made to defer Continuing Approval, and NEC to conduct a focus visit in Fall 2017, including meeting with students to evaluate whether problems have been resolved, or not. The program was to return to the ELC on January 11, 2018. Some of the issues that were identified and addressed with the Program Director, faculty and members of the administration team at the September 28, 2017 focus site visit included:

1. University Accreditation Status- Resolved- June 21-23, 2017, and the program was granted initial WASC accreditation for a period of six years.
2. Clinical Placement- Students Scheduling Issues- In meeting with faculty, the majority of FT faculty are new, and they have expressed satisfaction with the process as it has evolved. In meeting with students, they have reported that some progress has been made. However, students reported that scheduling problems still exist, and the issues have not been completely resolved. Dr. Dial was provided with the student’s feedback; she agreed with the students’ comments, and is aware of the situation. Program is planning on establishing a back-up plan to avoid changes in clinical placement schedules as much as possible.
3. Faculty Workload Schedule- Program has a total of 34 faculty (7 FT and 27 PT). The faculty workload for 2018, will be reviewed at the beginning of the first quarter of 2018 during a faculty meeting, and any necessary revisions will be done as needed. Since the beginning of the year 2017, AUHS has been actively recruiting and processing applicants for faculty position openings.
4. Faculty Orientation plans per BRN Recommendation-The new full-time faculty are assigned a regular faculty, who will be the mentor for and closely monitor the new faculty for one quarter and will be available for consultation for the remainder of the year.
5. CCR Section 1424 (d) Sufficiency of Resources- Program is currently using low and mid fidelity mannequins in the Skills lab; the Simulation lab is under construction. Program has integrated limited scenarios in each course. Faculty expressed the need for Simulation training in anticipation of expansion of the current Skills and Simulation labs.
6. CCR Section 1426.1 Preceptorship- The students reported that there is inconsistency in implementing the Leadership & Management clinical practice units; some students were assigned to observe or shadow the Nurse Managers, or Nurse Educators for all 90 hours of clinical practice without performing any Leadership / Management activities relevant to the direct patient care. The program submitted a plan for students to fully implement the preceptorship course in 2018. On December 14, 2017, the Program Director submitted an updated action plan report, which addressed the above identified issues, areas of non-compliance and recommendations. (Please see attached). The program is now in compliance with the Board rules and regulations. NCLEX-RN outcomes are well above minimum performance threshold: 2014-15 84.62%; 2015-2016 91.94%; 2016-2017 87.34%.

Ms. Gerber asked if the program has drilled down on the clinical placement issues, so it is not a temporary fix but ensures students have placements. Ms. Caraway responded that he EDP-P-11 shows clinical placements for the next year and beyond. All clinical placements lists have been revised and contracts updated. Ms. Gerber asked Ms. Caraway when she would next check to ensure placements? Ms. Caraway responded that this is a continuous process and if needed she will schedule another school visit. She included the administration was very supportive and have been compliant with her questions, very transparent, and she feels confident. Ms. De La Cruz-Reyes asked what type of facility and population the Crittiden Services served. Dr. Dial responded that the service was an outpatient clinic that cared for medical/surgical patients. Dr. Dial also included the program uses acute care facilities for their specialties. Ms. De La Cruz-Reyes asked what hospitals were used for pediatrics. Dr. Dial responded that St. Frances, Cedar Sinai, and Fountain Valley were used. Ms. De La Cruz-Reyes asked when the Simulation Lab would be complete. Dr. Dial responded that the school has hired an outside company to come in and assess their mannequins. The Lab should be functional in December. Ms. De La Cruz-Reyes asked if the Preceptorship was in place. Dr. Dial responded that the Preceptorship would start this quarter.

**ACTION:** Continue approval of American University of Health Sciences Baccalaureate Degree Nursing Program.

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**Public Input:** None.

7.3.2 West Hills-Lemoore Associate Degree Nursing Program

Kathryn Defede RN, MSN Director of Nursing, and District Director of Health Careers and represented the program.

Kathryn Defede RN, MSN represented the program.

Loretta Melby, Nursing Education Consultant presented the report. A continuing approval visit was conducted September 12 and 13, 2017 by Loretta Melby NEC and Shelley Ward NEC. The program had two areas of non-compliance. Section 3: Sufficiency of Resources 1426 (d) and Section 5: Curriculum 1426 (b). Two recommendations were made in Section 1: Program Director/Assistant Director 1424 (e) and (f) Please refer to the attached Report of Findings. The non-compliance related to sufficiency of resources was to address the inconsistent allocation of the institutional resources needed to sustain the program by relying primarily on grant funding. In January 2016 a new President took office at West Hills College Lemoore. A formalized budgetary process is now in place and significant campus changes have taken place beginning in 2106 that are in line to support campus programs. The DON believes that the nursing program is now receiving appropriate support and anticipates that this support with grow with the needs of the program. The second area of non-compliance regarding curriculum is specific to the program utilizing the 2006 California Curriculum Model that was adopted in 2008 with no major curriculum revisions since the inception of the program. Content does not sufficiently address the required elements.
The program hired Linda Caputi, Nursing Education Consultant, for faculty professional development on curriculum revision and assessment/evaluation of their curriculum and plans to have a curriculum ready for submission to the BRN for consideration in Fall of 2019 with implementation Fall of 2020. The college has also decided to address the two recommendations. Regarding the recommendation of adequacy of the 80% release time of the DON the college administration has agreed to a 100% release time for the DON to be located at the Lemoore campus with the anticipated start in Fall of 2018. The recommendation to update the ADON job description to reflect the regulatory language has been completed. College administration and the surrounding community has shown a strong commitment to the nursing program and vows to continue to provide the necessary support the program requires.

Ms. Gerber asked what the cost of the program was. Ms. Defede responded approximately $6,000.00 with $46.00 per unit. Ms. Defede went on to thank the ELC members saying her faculty are very committed to the new curriculum and will work through the Spring and Summer to get it ready for submission to the NEC. She states her mission was to change the funding sources for faculty to the college general fund and with the new College President, she has gotten approval for three new full-time faculty positions.

ACTION: Continue to Defer Continuing Approval Status for West Hills-Lemoore Associate Degree Nursing Program until Major Curriculum Revision is completed and approved.

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Public Input: None.

7.4 VOTE ON WHETHER TO RECOMMEND CONTINUATION OF APPROVAL OF ADVANCED PRACTICE NURSING PROGRAM

7.4.1 California State University, Long Beach Nurse Practitioner Program

Dr. Loucine Huckabay is the Director of Nursing.

A continuing approval visit was conducted on September 20-21, 2017 by Dr. Carol Velas and Dr. Linda Sperling, Nursing Education Consultants. The program was found to be in compliance with all rules and regulations of the Board. One recommendation was given in CCR 1484(d)(1) Curriculum, where several textbooks and supplemental resources for student learning and inquiry were found to be outdated.

ACTION: Continue Approval of California State University, Long Beach Nurse Practitioner Program.

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Public Input: None.

7.5 VOTE ON WHETHER TO RECOMMEND APPROVAL OF MAJOR CURRICULUM APPROVAL

7.5.1 Porterville College Associate Degree Nursing Program

Kim Behrens, MSN, RN has been the Program Director at Porterville College’s Associate Degree Nursing Program since June 2011.

The faculty at Porterville College submitted a major curriculum revision November 15, 2017. In response to BRN site visit recommendations, through the process of researching best educational practices, attending conferences regarding concept based curriculum and active learning strategies, hearing previous graduates and industry partners express a desire for new nurses to have better thinking skill, the faculty chose a concept based curriculum. The faculty have revised the whole curriculum, mission, philosophy,
program learning outcomes, student learning outcomes and competencies. Courses have been retitled, a critical thinking course was added to the first semester and a transition to practice course was added to the final semester. Seven Course Learning Outcomes (CLO) frame the curriculum with a focus on evidence-based practice, a culture of caring, leadership, management, legal and ethical principles, and Quality and Safety in Nursing Education Prelicensure competencies. These same CLOs provide the framework for the clinical evaluation tools that progress in nature from simple to complex concepts and specific to the medical/surgical, geriatric, reproducing family, pediatric, and psych/mental health patients. The total units required for graduation remain between 83-85 depending on prerequisites. Total nursing units are 41 with 22 units for theory and 19 units for clinical, 7 units in Communication, 20 units in Science, and between 15-17 units as other requirements for graduation. The curriculum revision did not change the total units for graduation. The revised curriculum meets all BRN rules and regulations. There are 12 total faculty with 4 fulltime and 8 part-time faculty to support the new curriculum. The faculty have undergone professional development in concept based theory with Dr. Linda Caputi for six days at Porterville College, and a one-day workshop on flipping the classroom with Tammy Vant Hul. Faculty is very excited to implement the new curriculum in Fall, 2018.

**ACTION:** Approve Major Curriculum Revision for Porterville College Associate Degree Nursing Program.

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Public Input: None.

**7.6 VOTE ON WHETHER TO RECOMMEND APPROVAL OF MAJOR CURRICULUM REVISION-ENROLLMENT CHANGE**

**7.6.1 California State University, Stanislaus Baccalaureate Degree Nursing Program**

Deborah Tavernier EdD, MSN, RN is the Program Director and along with Janell Culjis, RN, PhD, ANP Director of the ASBSN program represented the program.

Susan Engle, Nursing Education Consultant presented the report. California State University, Stanislaus Baccalaureate Degree Nursing Program submitted a major curriculum revision proposal to request an increase in enrollment of ten (10) students in the Accelerated Second Bachelor’s Degree in Science of Nursing (ASBSN). The ASBSN program was approved in 2011 by the Board to admit thirty (30) students annually (January). The proposed change is to increase enrollments for the ASBSN program to 40 students annually (January). The program has provided evidence that the increase in enrollment will not impact clinical placements for Modesto Junior College, San Joaquin Delta College or University of Phoenix, Modesto. In addition, the program has sufficient resources to support the increase. Please refer to the documents attached for the history of the ASBSN program, information on community partner request, sufficiency of resources, budget, and clinical facilities.

**ACTION:** Approve Major Curriculum Revision for California State University, Stanislaus Accelerated BSN program with the increase in enrollment of 10 students for an annual enrollment of 40 students.

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Public Input: None.
7.7 VOTE ON WHETHER OR RECOMMEND GRANTING OF INITIAL APPROVAL OF PRELICENSURE NURSING PROGRAMS

7.7.1 Brandman University Associate Degree Nursing Program
Rachel Choudhury, MSN, RN, CNE is the Program Director and along with Dr. Tyke Hanisch Dean, and Vice Chancellor and Provost Charles Bullock represented the program. Loretta Melby presented the report. An initial program approval site visit for Brandman University Bachelor of Science in Nursing Program at the San Diego campus location was conducted on May 17, 2017 by Loretta Melby, NEC. The feasibility study for the proposed program was accepted by the Board at the April 2016 meeting. The program was found to be in compliance with the Board’s rules and regulations. In October 2017 Brandman appeared before the Education Licensing Committee meeting where discussion followed regarding Pediatric clinical placements. On November 9, 2017 the BRN decided to “Defer granting approval of Brandman University Baccalaureate Degree Nursing Program until there is adequate Pediatric clinical placement.” The University has clinical contracts with Sharp Healthcare and Desert Regional Medical Center. These clinical agreements will allow the students to have access to clinical rotations in all of the clinical practice areas required for licensure. Brandman intends to utilize the outpatient pediatric clinics available through Sharp Rees-Stealy, as indicated in the revised EDP-P-11, appendix D. Students will be placed in clinical groups of six students per one clinical faculty at the approved/assigned clinical sites. Approximately four clinical groups are anticipated for clinical placement. The program is planning to offer the pediatric course three times a year. The clinical placements will be utilized during weeks 2-6 (~40 hours) for clinical learning experiences with direct patient contact. Five hours of simulated learning activity will be used to supplement clinical experiences, which will be conducted in one of the days between weeks 6-7. Clinical make-up by students will be conducted in week 7 as necessary. Currently, six potential outpatient clinical sites are available for student clinical placements. Sharp has reported to Brandman that these placements are available and will not displace students from nursing programs currently using these same facilities. The use of pediatric clinical placements at Desert Regional Medical Center will be used primarily for precepted clinical experiences in NURU 495 Capstone Practicum. The clinical experiences will include acute care in the NICU and pediatric unit, with some outpatient/community health experiences related to these specialty areas. The program will prioritize placement of students who: (a) voluntarily requests placement at the DRMC clinical site; (b) live in the area within 50-mile radius of the facility; (c) have expressed serious interest to work in these nursing specialty areas upon graduation from the program; (d) have demonstrated exceptional course and clinical performance in NURU 461 and NURU 463 (Pediatrics) or NURU462 and NURU 465 (Maternal/Child). Students will be assigned to precepted clinical learning experiences based on the availability of placements provided by the clinical agency partner. (Please see attached “Supporting Documents”) Brandman will continue to look in to obtaining additional pediatric clinical contracts and will work with Rady’s Children’s Hospital to obtain precepted acute pediatric clinical experiences for NURU 495 Capstone Practicum course. The BSN program curriculum is intended to be completed in 8 Trimesters and includes the content required for licensure and college degree requirements. It is designed to offer an Bachelor’s Degree in Nursing upon program completion. The curriculum is conducted in a 16-week semester and is completed in 8 trimesters. Each trimester has 13-16 total units. Total Units for Licensure is 108. Total Units for Graduation is 120.

Ms. Gerber asked if the school had confirmation from all other schools that these placements will not displace their students? Ms. Melby responded that in October at the ELC meeting all data was presented and that the San Diego Consortium states there is and will be displacement of students throughout San Diego County from many schools besides Brandman. Ms. Melby also included that she contacted Sharp Healthcare and they say there is no displacement at their facility with the
addition of the Brandman nursing students. Ms. Gerber concluded by saying the Board has been notified there is displacement so when Sharp states there is no displacement, it is a conflict which is a big problem. Ms. Melby informed the members that Rady-Children’s hospital has embedded their pediatric services in many San Diego hospitals so there is difficulty getting into acute care in these hospitals. Ms. Gerber asked for clarification of the regulation for clinical practice. Dr. Velas read CCR 1426(d); Theory and clinical practice shall be concurrent in the following nursing areas: geriatrics, medical-surgical, mental health/psychiatric nursing, obstetrics, and pediatrics. Instructional outcomes will focus on delivering safe, therapeutic, effective, patient-centered care; practicing evidence-based practice; working as part of interdisciplinary teams; focusing on quality improvement; and using information technology. Instructional content shall include, but is not limited to, the following: critical thinking, personal hygiene, patient protection and safety, pain management, human sexuality, client abuse, cultural diversity, nutrition (including therapeutic aspects), pharmacology, patient advocacy, legal, social and ethical aspects of nursing, and nursing leadership and management. Ms. De La Cruz-Reyes commented that consumers want pediatric nurses to experience. Ms. Del La Cruz-Reyes asked how much of the pediatric curriculum was simulation. Ms. Melby responded that there are five hours of pediatric simulation. Ms. De La Cruz-Reyes asked how many registered nurses are available in the ambulatory centers to work with students. Ms. Choudhury responded there is one RN at each site and 3-4 faculty for each group of students. Ms. De La Cruz-Reyes also asked how 3-4 faculty can meet with all students and ensure standardized outcomes. Ms. Choudhury responded that the clinical evaluation tool used provides the outcome focus. Ms. De La Cruz-Reyes asked if students will be in any pediatric acute care setting. Ms. Choudhury responded not at this time. Students who desire pediatrics will have an opportunity to complete a pediatric preceptorship later in the curriculum. Ms. De La Cruz-Reyes asked what the daily pediatric census was at Desert Hospital. Ms. Choudhury responded there are 3-5 pediatric patients each day and only 1 student will be assigned per shift or day to that hospital. Ms. De La Cruz-Reyes commented that her understanding of the regulation was that the standard of training should be the same for all students and she was wondering how the program will accomplish this with students in acute versus out patient settings. Ms. Choudhury responded that the program and course objective as well as the clinical evaluation are all aligned to provide these experiences to meet the course objectives. The Provost, Dr. Charles Bullock included that Brandman University has been nationally recognized for its assessment strategies and he believes they can use simulation in pediatrics to provide acute care experiences for students. The program has scenarios for pediatric and neonatal intensive care and has a Pediatric Nurse Practitioner for these simulations. Ms. De La Cruz-Reyes asked if there was dedicated faculty for the simulation lab. Dr. Hanisch responded there was both medical/surgical and pediatric faculty to run the simulations. It was also mentions that Brandman University is CCNE and WASC accredited. A recess was called during this agenda item to contact the DCA attorney for clarification regarding the CCR 1426(d) regulation.

Meeting resumed. Mr. Santiago stated he could not give advice regarding the CCR 1426(d) and would need time to research. Ms. Gerber states she was not fully prepared to make a decision at this time. Mr. Jackson has recused himself from this agenda item and vote as he is a faculty member in San Diego country. Ms. Gerber stated there is conflict of information from the region about clinical displacement. Ms. Melby stated there is displacement throughout San Diego County. Ms. De La Cruz-Reyes stated she is concerned with faculty supervision of students. Ms. Melby responded the faculty hiring plan was submitted, there will be 2-3 faculty with 1:1 ratio for peds outpatient experience. Ms. Gerber commented that legal counsel will provide statutory and regulatory clarification and that only having students in outpatient settings in Peds is a slippery
slope. Dr. Bullock stated he wanted Brandman University to be treated as fairly as are other universities. Ms. Melby stated she has been communicating with Dr. Morris throughout the approval process and that Dr. Morris has been communicating with legal counsel at the BRN. Dr. Bullock stated he would be taking this up with legal counsel at Brandman University.

**ACTION:** Defer granting initial approval to Brandman University Baccalaureate Degree Nursing Program until there is clarification on regulations, return to Education and Licensing Committee meeting in March.

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<th>Motion: Donna Gerber</th>
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Public Input:
Loleta Gibson, Veterans Administration Administrator stated that in her past experience as a program director her pediatric clinical rotations in the acute setting were mainly observation. Deborah Tavernier EdD, MSN, RN is the Program Director agreed with Donna Gerber that having peds only in outpatient and simulation could become a slippery slope for all content areas. She stated that the clinical experience for students should be a blend of all patient care settings.

**7.8 PROGRESS REPORT FOR EL CAMINO COLLEGE ASSOCIATE DEGREE NURSING PROGRAM AND COMPTON COLLEGE ASSOCIATE DEGREE NURSING PROGRAM SEPARATION**

Wanda Morris, RN, CNS, MN, EdD, has been Director of Nursing for the Associate Degree Nursing (ADN) Program at both campuses since January 6, 2015 and represented the program. Badrieh Caraway, Supervising Nursing Education Consultant presented the report. The four Assistant Directors assigned to both campuses are as follows: ECC campus- Peggy Kidwell-Udin, RN, MSN, C.N.S., MEd and Kathleen Rosales, RN, MSN; CEC- campus Zenaida M. Mitu, RN, MA and Shirley Thomas, RN, MSN, FNP, RNC-OB, Ed.D. Since the initial letter was sent, dated September 18, 2017, the Compton Community College District (CCCD) has continued to hold a transition meeting once a month to discuss the progress of the various divisions, departments and program at the Compton campus. The last meeting was held on December 12, 2017.

The Nursing program update includes implementation of strategies to enhance the NCLEX- RN pass rate on the NCLEX-RN exam. These strategies include the following:

1. Developed a policy to include incorporating standardized testing across the curriculum.
2. Use of ATI capstone review in the 4th semester of the nursing program.
3. Use of the ATI RN Comprehensive Predictor assessment to identify areas of weakness and assist those who experience deficiencies with tutoring and mentoring.
4. Offer all graduates the opportunity to attend a face to face NCLEX -RN review 3-5 weeks after graduating.
5. Student Success facilitators have been added to each semester of the nursing program to assist students with tutoring and mentoring. Students who scored <76% on any exam are required to attend a Student Success Seminar/ Workshop on a weekly basis throughout the duration of the course.
6. ATI faculty facilitator will be hired beginning spring 2018 to assist with students identified by ATI as to being at risk.

During the first quarter of the 2017 academic year, the Compton College NCLEX pass rate was 83.33%. There were eighteen (18) graduates to test; fifteen (15) passed; and three (3) failed, and they were tested again in Spring 2017 and were graduated. The students’ cohort for the fall 2017 semester at the Compton campus consists of 30 students. During the twelve (12th) weeks of their sixteen (16th) week semester, the
ATI RN Comprehensive Predictor assessment exam was administered; twenty-nine (29) of thirty (30) students successfully passed the exam. Toward the end of the fall 2017 semester, a meeting was held with the graduates to emphasize the importance of taking the NCLEX exam within three (3) months of graduating from the program.

**ACTION:** No action, information only.

### 7.9 SHEPHERD UNIVERSITY ASSOCIATE DEGREE NURSING PROGRAM UPDATE

Wayne Boyer, Nursing Education Consultant presented the report. Shepherd University (SU) Associate Degree Nursing Program was determined to be in non-compliance with CCR 1432(a)(2) Notify the Board within ten working days of (A) Change in fiscal condition that will or may potentially adversely affect applicants or students enrolled in the nursing program and (B) Substantive change in the organizational structure, administrative responsibility, or accountability in the nursing program, the institution of higher education in which the nursing program is located or with which it is affiliated that will affect the nursing program. The issues involving SU were learned via a complaint lodged by an anonymous student that was received September 11, 2017 and alleged that SU has been experiencing serious financial challenges during the past several months, due to mismanagement of the past leadership. SU had previously been on Warning Status with Intent to Close due to low NCLEX-RN pass rates. SU was advised by experts and legal counsel, to file for Chapter 11 Protection Petition which was filed on August 14, 2017. This would allow the University to restructure and reorganize itself, its revenue, income and financial operations, and take care of the financial responsibilities. SU administration informed this NEC, October 12, 2017 that a benefactor had been secured and the fiscal status of SU would improve. The University was unable to remedy its multiple fiscal issues and Mr. Bradley Sharp was appointed as Trustee by the Bankruptcy Court on December 13, 2017. SU has lost its BPPE accreditation and was determined to be ineligible for WASC accreditation. On November 8, 2017, The Board of Registered Nursing voted to withdraw program approval for SU with the implementation of the teach out plan developed by BPPE. SU physically closed its doors December 22, 2017. Local public and private colleges with approved pre-licensure programs were quarried by BRN staff and Mr. Sharp regarding accepting SU’s displaced nursing students. American Career College has voiced interest in accepting some of the students. BPPE will assist with the transfer to American Career College for those who accept that option. ACC is a new program, approved October 9, 2014 for enrollment of 30 students twice a year. ACC has one annual (2015-2016) NCLEX pass rate of 79.07%. The next scheduled admission date is February 16, 2018.

Please refer to supporting documentation. The program is considering increasing its enrollment numbers. A meeting was planned and conducted on December 21, 2017 with students and staff of SU by representatives from the Office of Student Assistance and Relief that informed them of their opportunities for transfer to other programs or financial reimbursement.

Prior to this meeting, students notified and invited Glendale Career College (GCC) to speak with them and GCC representatives conducted a meeting with them at 10:00 am prior to the scheduled 1:00 pm meeting. Written notification received from GCC revealed that GCC is also interested in taking the SU students, hiring prior SU faculty and providing the opportunity for the SU students to complete the SU curriculum. This would be a separate cohort from the approved GCC enrollment. GCC is a new program, having been approved June 2016 for an enrollment of 60 students per year. The program will have its first graduating class Fall 2018 (August). Please refer to supporting documentation. The addition of these displaced students would be a one-time enrollment increase.

**Dr. Molly Hahm stated she was at the meeting to support Glendale Career College (GCC) for offering to take all the SU students. “It is the least disruptive manner in the most efficient way, so students will receive full credit.” Mr. Bailor Mazer from GCC stated he was also present to reiterate what Dr. Hahm had said and that GCC could support the SU students. A student, Haden,
expressed his thankfulness and honor to be before the ELC to state he was placed in a position as a SU student that he was not prepared for, it was a disaster, but it wasn’t the faculty’s fault. Daniel Joen, Student Association President, stated he contact most community colleges in the area (Pasadena and Glendale) but the schools could not accommodate the SU students. He contacted GCC and invited them to come and speak with SU students. Mr. Mazer and Mr. Mitchell presented a transfer option where all 40 students could transfer and start classes by the end of January if the ELC approved GCC’s increased enrollment. Mr. Jeon stated that many students on Visa’s from Korea will have to return to Korea if they do not start courses again by the end of January. Haden commented that he is very scared, and many students cried. Their families have sacrificed for their education to come to America and study nursing. Ms. Gerber thanked Dr. Boyle and staff for the work to bring SU back to the ELC. Ms. Gerber stated she was under the impression that in November SU would implement their teach out plan but that didn’t happen. Ms. De La Cruz-Reyes comments that this is the worst-case scenario when a school closes and students are directly affected. She also stated appreciation for SU student’s tenacity for keeping everyone’s feet to the fire. Mr. Jackson called for a 10-minute recess.

Mr. Jackson recommended to call a special Board Meeting in ten days following the ELC meeting to grant a one-time enrollment increase to any school who can absorb SU students.

ACTION: Special Board meeting (teleconference) is schedule for January 23, 2018. American Career College and Glendale Career College will submit major curriculum revisions for a one-time enrollment increase to absorb any student wanting to attend either college.

Public input:

Mr. Mazer thanked the ELC members for going the extra mile to help the SU students. Ellen Lewis, MSN, RN from American Career College stated a student applied to ACC but doesn’t know where to get their transcript. Dr. Boyer responded he would investigate.

7.10 CONTINUING EDUCATION AD HOC MEETING UPDATE REPORT

Susan Engle, Nursing Education Consultant presented the report. Continuing Education Ad Hoc Meeting was held September 26, 2017. Board members Michael Jackson and Donna Gerber and liaisons Dr. Morris, Stacie Berumen and Dr. Engle, attended the meeting. Michael Jackson and Donna Gerber and BRN liaisons reviewed SB 799 Chaptered 520 approved by the Governor on October 05, 2017. Business & Profession Code 2811.5 (1) includes that the Board will deliver a report to the appropriate legislative policy committees detailing a comprehensive plan for approving and disapproving continuing education opportunities. BRN staff is to provide a draft plan at the next Continuing Education Ad Hoc Meeting.

ACTION: No action, information only.

7.11 PUBLIC COMMENT FOR ITEMS NOT ON THE AGENDA

7.12 ADJOURNMENT

Submitted by: 

Carol A. Velas, EdD, MSN, RN
Nursing Education Consultant/ELC Liaison

Accepted by:

Michael Jackson, MSN, RN
Chairperson