## Ohio Board of Nursing www.nursing.ohio.gov

17 South High Street, Suite 400 • Columbus, Ohio 43215-7410 • (614) 466-3947

January 20, 2012

## NOTICE OF OPPORTUNITY FOR HEARING

Erin Stout, M.S.N., R.N. **Program Administrator** Ohio American Health Care Inc. **Practical Nursing Program** 2323 Lake Club Drive Columbus, OH 43232

Dear Ms. Stout:

In accordance with Chapter 119, Ohio Revised Code (hereinafter "ORC"), you are hereby notified that the Ohio Board of Nursing (hereinafter "Board") proposes under authority of Section 4723.06(A)(6), ORC, to withdraw conditional approval and deny full approval status to Ohio American Health Care Inc. Practical Nursing Program ("Program") for the following reasons:

- 1. On or about October 12, 2011, the Board conducted an unannounced survey visit of the Program to review whether the Program was meeting and maintaining the standards for education programs established in Chapter 4723-5, Ohio Administrative Code (OAC), in accordance with Rule 4723-5-06, OAC. On or about November 29, 2011, the Board sent the Program a Survey Visit Report identifying standards not met and maintained. On or about December 20, 2011, the Board received documentation in response to the Survey Visit from the Program (Response). On January 20, 2012, the Board met and, having considered the Survey Report and the Program's Response, has determined that the following standards established in Chapter 4723-5, OAC, have not been met or maintained:
  - a. Despite being required by Rule 4723-5-05, OAC, the Program Administrator did not did not timely submit information as required by the Board, and did not provide all of the information that was requested by the Board in a letter dated September 19, 2011, to the Program Administrator. Specifically, the Board requested the submission of additional information to be provided in writing to the Board on or before September 26, 2011, as follows:
    - 1. The reason(s) for changing the completion date for the

Program's first student cohort completion;

- 2. A list of all students by name who were admitted to the Program as the Program's first cohort at the time of the Program's implementation;
- 3. A list of all students by name who are in the first cohort as of the date of this letter; and
- 4. A list of all students by name who are currently enrolled in the Program with associated date of Program completion for each enrolled student.

The Program Administrator did not submit any information to the Board in writing until October 6, 2011, and the information listed in 4., above, i.e., the list of all students by name that were currently enrolled in the Program with associated date of Program completion for each enrolled student, was not provided until December 20, 2011.

Rule 4723-5-05(B) and (C), OAC, state that when requested by the board, the administrator of the program shall submit progress reports or periodic supplemental reports, completed questionnaires and surveys, and other documents that shall include the information requested by the board. The administrator of the program shall complete all surveys or questionnaires requested by the board to verify compliance with this chapter. Failure to submit a report as required by the board may result in a change of the program's approval status in accordance with Rule 4723-5-04 of the Administrative Code.

b. Despite being required by Rule 4723-5-09(B), OAC, the Program Administrator did not have the authority, accountability, and responsibility for all aspects of the Program, as follows: (i) The Program Administrator allowed involvement of a member of the Governing Board of Directors in the operations of the Program. The Program's organizational chart indicates that all nursing faculty reported directly to the Assistant Director of Nursing. The Assistant Director of Nursing reported directly to the Program Administrator. The Program Administrator reported to the Program's Office Manager/Student Services Coordinator, who reported to Yemi Oladimeji. Yemi Oladimeji reported to the Governing Board of Directors. The organizational chart does not indicate any direct report between the Board of Governors and the Program's employees, other than Mr. Oladimeji, and no involvement in or responsibility of individual members of the Board of Governors in Program operations. Despite this, during the survey visit, a member of the Board of Governors (a non-nurse named Reverend Harold John) appeared to be

> involved in and/or responsible for Program operations. Examples include, but are not limited to, the member of the Board of Governors stating that he had reorganized students' files, was familiar with the Program's operations, and was available to assist Board staff in the survey process; further, the member had signed the orientation document for an adjunct faculty member on September 27, 2011, and sought Board staff consultation regarding the specifics of the student handbook; (ii) At the time of the survey visit, the Program Administrator stated that she would work only "a few hours a week" in her capacity as Program Administrator. During the survey visit, the Program Administrator was unfamiliar with the Program's hiring of an adjunct professor; (iii) The Program Administrator did not ensure that the Program's orientation policy was implemented for every new employee of the Program; (iv) The Program Administrator allowed the (unqualified) associate administrator to engage in administrative responsibilities of the Program, including preparing the Program's budget.

Rule 4723-5-09(B), OAC, states that the program shall be administered by a registered nurse administrator who meets the qualifications set forth in Rule 4723-5-11 of the Administrative Code for a practical nursing education program. The program administrator shall have the authority, accountability, and responsibility for all aspects of the program, including but not limited to those items set forth in paragraphs (1) through (10) of Rule 4723-5-09(B), OAC.

c. Despite being required by Rule 4723-5-11, OAC, The Program utilized an individual as an associate administrator who did not meet qualifications of an associate administrator. The Program utilized "Adjunct Professor and/or "Lab Assistant" Karen Tedder, despite the fact that Ms. Tedder was initially licensed as a registered nurse on March 24, 2010, and did not have two years experience as a registered nurse. Additionally, the Program utilized an unqualified individual to teach a nursing course(s), i.e., "LPN 2 Pharmacology and/or "PN005-Medication Administration/Pharmacology," objectives of the latter of which included the effective use of "the nursing process," the "nurse's responsibilities," and "patient teaching." This individual (Dennis Koroma) did not hold a current, valid license or certificate issued by the state of Ohio.

Rule 4723-5-11, OAC, states that (A) The minimum qualifications and academic preparation for administrative, faculty, and instructional personnel appointments for a practical nursing education program are as follows: (2) For an associate administrator of a program: (b) At least five years of experience in the practice of nursing as a registered nurse, including two years as a faculty member in a registered or practical nursing education program; (3) For faculty

teaching a nursing course: (a) Completion of an approved registered nursing education program in a jurisdiction as defined in paragraph (S) of rule 4723-5-01 of the Administrative Code; (b) Experience for at least two years in the practice of nursing as a registered nurse; (c) A baccalaureate degree in nursing; and (d) Current, valid licensure as a registered nurse in Ohio; (6) A nurse or other health care professional who is not eligible to serve as a faculty member under the provisions of this rule, may be utilized to provide instruction in a practical nursing education program if the individual: (a) Holds a current, valid license or certificate issued by the state of Ohio; (b) Teaches at the direction of a registered nurse faculty member; and (c) Provides information that is consistent with the educational preparation and scope of practice of the health care professional.

d. Despite being required by Rule 4723-5-12, OAC, The Program Administrator did not establish and implement written policies for payment of student fees and expenses;

Rule 4723-5-12(A), OAC, states that the administrator of the program and the faculty shall establish and implement written policies for the following: (6) Payment of fees, expenses, and refunds associated with the program.

e. Despite being required by Rule 4723-5-14, OAC, the Program did not implement the curriculum as stated in the Program's Curriculum Plan located in the 2011-2012 School Catalog/Student Handbook, which revealed that eight (8) out of the Program's eleven (11) nursing courses required hours for skills laboratory and/or clinical as applicable. Similarly, the Program's proposal for conditional approval to the Board contained laboratory and clinical checklists that corresponded with the same courses, requiring laboratory and clinical performance evaluations for students that completed each course. None of the student performance evaluations provided at the survey visit were for any of the fifty-seven (57) students (See Attached Student Key To Remain Confidential and Not Subject To Public Disclosure) included on the provided Practical Nursing Program student roster. Further, during the survey visit, a faculty member for "PN011 Medical Surgical Nursing 1 and IV Therapy" reported that the Program is not providing students the opportunity to practice technical skills related to IV therapy in the clinical setting. The Program Administrator stated that is "another thing we need to work on."

Rule 4723-5-14, OAC, states that (A) The practical nursing education program curriculum shall include content that validates the student's acquired knowledge, skills and behaviors that are necessary to safely and effectively engage in the practice of licensed practical nursing, as defined in division (F) of section 4723.01 of the Revised Code. (C) The curriculum objectives or outcomes, course objectives or outcomes, teaching strategies, and evaluation methods shall

be: 3) Implemented as written; (E) The curriculum shall consist of content that spans a minimum length of one academic or calendar year of full-time study, and shall include but not be limited to the following areas of study that may be integrated, combined, or presented as separate courses: (12) Clinical and laboratory experiences that: (b) Provide a nursing student with the opportunity to practice cognitive, psychomotor, and affective skills in the performance of a variety of basic nursing functions with individuals or groups across the life span; (c) Provide a nursing student with the opportunity to practice technical skills.; (F) In addition to the content set forth in paragraph (E) of this rule, beginning on January 1, 2009, all practical nursing education programs shall include a course or content in intravenous therapy. A course or content in intravenous therapy to be included in a practical nursing education program shall have, at a minimum, didactic, laboratory, and supervised clinical practice that covers the following: (1) The law and rules related to the role, accountability, and responsibility of the licensed practical nurse in intravenous therapy; (2) Policies and procedures related to intravenous therapy and affiliating clinical agencies; (3) Sciences related to intravenous therapy, including, but not limited to anatomy, physiology, microbiology and standard precautions, principles of physics, pharmacology, and pharmacology mathematics; (4) Nursing care of individuals receiving intravenous therapy, including but not limited to, procedures for: (a) Venipuncture; (b) Adding intravenous solutions to existing infusions; (c) Additive administration and intravenous line maintenance in accordance with section 4723.17 of the Revised Code; (d) Hanging and regulating the flow of intravenous solutions; (e) Changing intravenous tubing; (f) Performing intravenous dressing changes; (g) Flushing and converting peripheral intermittent infusion devices and heplocks; (h) Guidelines for preventing, identifying, and managing complications; (i) Related psychosocial preparation and care; (5) Documentation related to intravenous care; (6) Any other training or instruction the board considers appropriate; (7) A testing component through which a student is able to demonstrate competency related to intravenous therapy; (8) A means to verify that a student has successfully completed the course in intravenous therapy as set forth in this rule.

f. Despite being required by Rule 4723-5-15, OAC, the Program Administrator did not provide documentation that each aspect of the program was evaluated. No documentation was provided to support that the systematic plan of evaluation had been used to plan and implement changes in the program since the Program's inception;

4723-5-15, OAC, states that a written systematic plan of evaluation shall be established by the administrator of a program and shall include data collected from faculty, instructional personnel, nursing students, graduates, and employers of graduates and shall: (A) Specify the responsibility, time frame, and procedure for evaluating each aspect of the program, including: (1) Program organization and administration as set forth in Rule 4723-5-09 of the Administrative Code; (2) Qualifications of administrative, faculty, and instructional personnel as set forth in Rule 4723-5-11 of the Administrative Code for a practical nursing education program; (3) Program policies as set forth in Rule 4723-5-12 of the Administrative Code; (4)

Curriculum as set forth in Rule 4723-5-14 of the Administrative Code for a practical nursing education program; (5) Evaluation plan of the program as set forth in this rule; (6) Program contractual relationships as set forth in Rule 4723-5-17 of the Administrative Code; (7) Responsibilities of faculty teaching a nursing course as set forth in Rule 4723-5-19 of the Administrative Code; (8) Responsibilities of faculty and instructional personnel in a clinical setting involving the delivery of nursing care to an individual or group of individuals as set forth in Rule 4723-5-20 of the Administrative Code; (9) Retention of program records as set forth in Rule 4723-5-21 of the Administrative Code; (10) Licensure examination results as set forth in Rule 4723-5-23 of the Administrative Code; and (11) Follow-up of graduates, which shall include but not limited to: (a) Statistics on the number of first-time candidates passing the licensure examination during each calendar year; and (b) Employment patterns of graduates; (B) The results of the evaluation of each aspect of the program as set forth in paragraph (A) of this rule shall be summarized and documented; and (C) Documentation shall demonstrate that the results of the evaluation of each aspect of the program as set forth in paragraph (A) of this rule have been used to plan and implement changes in the program.

g. Despite being required by Rule 4723-5-20, OAC, the faculty did not evaluate students' experiences in the clinical setting for fifty-seven (57) students enrolled in the Practical Nursing Program (see attached Student Key);

Rule 4723-5-20(A) and (C), OAC, state in pertinent part that (A) A faculty member of a nursing education program is responsible for planning the student's clinical experience and for evaluating the student's performance. (C) All experiences for a nursing student in a clinical setting involving the delivery of nursing care to an individual or group of individuals shall be performed under the direction of a faculty member who functions only as a faculty member during the nursing student's clinical experience. The faculty member providing direction shall: 6) Evaluate the student's experience, achievement, and progress in relation to the clinical objectives or outcomes, with input from the teaching assistant or preceptor, if utilized.

h. Despite being required by Rule 4723-5-21, OAC, the Program Administrator did not implement a record retention plan for currently enrolled students that would include student clinical experience evaluation records, and records for each faculty and teaching assistant currently being utilized in the program that would include documentation of academic credentials, including copies of official transcripts and verification of current licensure as a registered nurse in Ohio at the time of appointment.

Rule 4723-5-21, OAC, states in pertinent part that the administrator of the program shall develop and implement a record retention plan that shall include: (A) Records for currently enrolled nursing students that include: (3) Clinical experience evaluation records. (D)

Records for each faculty and teaching assistant currently being utilized in the program that shall include documentation of: (1) Academic credentials, including copies of official academic transcripts; and (3) Verification of current, valid licensure as a registered nurse in Ohio at the time of appointment, and at each licensure renewal. License verification shall be kept on file for a minimum time period of five years from the date of verification.

Section 4723.06(A)(6), ORC, requires that, for a prelicensure nursing education program that has been granted conditional approval by the Board, at the Board's first meeting after the first class has completed the program, the Board shall determine whether to grant full approval to the program. If the Board does not grant full approval or if it appears that the program has failed to meet and maintain standards established by rules adopted under Section 4723.07 of the Revised Code, the Board shall hold an adjudication under Chapter 119. of the Revised Code to consider the program. Based on the results of the adjudication, the Board may continue or withdraw conditional approval, or grant full approval.

Accordingly, the Board is authorized to propose to deny full approval and withdraw conditional approval of the Program based upon its failure to meet and maintain the standards established in rules adopted under Section 4723.07, ORC.

In accordance with Chapter 119, ORC, you are hereby informed that the Program is entitled to a hearing in this matter. If the Program wishes to request such hearing, the request must be made in writing and must be received in the Board office within thirty (30) days of the time of mailing of this notice.

You are hereby further informed that, if the Program timely requests a hearing, Section 119.07, ORC, states that "at the hearing [the Program] may appear in person, by its attorney, or by such other representative as is permitted to practice before the [Board], or may present [its] position, arguments, or contentions in writing." At the hearing the Program may also present evidence and examine witnesses appearing for and against the Program.

Should you choose to request a hearing, please mail or deliver the request, in addition to any other correspondence regarding this matter, to Lisa Ferguson-Ramos, Compliance Unit Manager, Ohio Board of Nursing, 17 South High Street, Suite 400, Columbus OH, 43215-7410, or to the email address, hearing@nursing.ohio.gov.

If the Board fails to receive a request for a hearing within thirty (30) days of the time of mailing of this notice, the Board may, in the Program's absence and upon consideration of the factual and legal allegations set forth in this Notice of Opportunity for Hearing, withdraw conditional approval and deny full approval status.

Sincerely,

Berta M. Lovelice

Bertha M. Lovelace, R.N., C.R.N.A., President

Certified Mail Receipt No. 7011 1150 0002 0937 3796 Attorney Certified Mail Receipt No. 7011 1150 0002 0937 3802

cc: Michelle Sutter, Assistant Attorney General

Elizabeth Y. Collis, Esq.