



January 20, 2012

NOTICE OF OPPORTUNITY FOR HEARING

Erin Stout, M.S.N., R.N.
Program Administrator
Ohio American Health Care Inc.
Registered Nurse 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. Registered 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 December 1, 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 4723-5-09(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; additionally, the member directed faculty in the instruction of a nursing course ("RN003 Nursing Through the Lifespan Maternity and Newborn"), and had conferred with the Program Administrator about the Program completion of two students in the first cohort; (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, and was unfamiliar with two Program classrooms and classes being conducted; (iii) The Program Administrator did not ensure that the Program's orientation policy was implemented for every new employee of the Program; and (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 4723-5-10 of the Administrative Code for a registered 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.

- b. Despite the requirements of Rule 4723-5-10, OAC, the Program utilized an individual as an associate administrator who did not meet the 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. The Program utilized Traci Manning, who lacks a master's degree, to teach "RN003 Nursing Through The Lifespan Maternity and Newborn." When asked by Board staff during the survey visit what

masters-prepared faculty was directing her teaching, Ms. Manning reported that Reverend John, a non-nurse member of the Governing Board of Directors, discussed above, directed her to “teach the course, make up the exams, and grade the students work.” Ms. Manning additionally stated that she had provided the lectures, exams and student grades without the direction of a qualified faculty member since September 2011. Finally, the Program utilized an unqualified individual to teach a nursing course (“RN002 Pharmacology”), objectives of which included “the nursing process,” the “nursing considerations,” and “patient care and teaching.” This individual (Dennis Koroma) did not hold a current, valid license or certificate issued by the state of Ohio.

Rule 4723-5-10, OAC, states that (A) The minimum qualifications and academic preparation for administrative, faculty, and instructional personnel appointments for a registered nursing education program are as follows: (2) For an associate administrator of a program: (b) Experience for at least five years in the practice of nursing as a registered nurse, two of which have been as a faculty member in a registered 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 master's degree; (i) If the individual does not possess a bachelor of science in nursing degree, the master's or other academic degree, including, but not limited to a Ph.D., shall be in nursing; (ii) If the individual possesses a bachelor of science in nursing degree, the master's degree may be, but is not required to be, in nursing; (4) For a teaching assistant as defined in paragraph (KK) 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; (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 registered nursing education program if the individual: (a) Holds a current, valid license or certificate to practice 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.

- c. Despite being required by Rule 4723-5-12, OAC, the Program did not implement its written policies related to student admission, progression, completion, and refunds and did not establish a written policy for fees and expenses, as follows: (i) At the time of the survey visit, fifteen (15) of the twenty-two (22) students currently enrolled in the fourth cohort had student files that were missing documentation of admission prerequisites, required by the policy set forth in the 2011-2012 Student Catalog/Handbook to be submitted on or before the student's orientation day (September 26, 2011) or by the first day of classes (October 3, 2011). The files for students #1-3, #5-8, and #10-15 (*See Attached Student Key To Remain Confidential and Not Subject To Public*

Disclosure) did not contain three (3) completed references; the entrance score for student #8 was below the required 80%; the files for students #5, #9, and #15 did not contain documentation of malpractice insurance, the files for student #5 and #15 did not contain evidence of a criminal background check, and the files for students #1-4, #6, #9-11, #14, and #15 did not contain evidence of the Program's health requirements (e.g., health history and physical exam, immunizations, negative chest x-ray or tuberculin test) as required by the Program's admission policy; (ii) Despite the Program's policy, stated in the 2011-2012 Catalog/Student Handbook, that a student must successfully complete each course prior to advancing to the next level course, the following occurred: At the time of the survey visit, no grades were entered for the first cohort students #16-31 for "RN002 Pharmacology." Despite no recorded grades, the students were progressed to "RN003 Nursing Through the Life Span Maternity and Newborn, Pediatrics, Gerontology and Mental Health Nursing." The same students were then progressed to "RN004 Leadership"; (iii) Documentation provided for students #26 and #28 revealed that they were determined to have completed the Program, despite the fact that they did not "complete the entire program as prescribed by the School/Institution", as is required by the Graduation Policy stated in the 2009-2010 School Catalog, 2010-2011 School Catalog/Student Handbook, and 2011-2012 School Catalog/Student Handbook. During the survey visit, the Program Administrator indicated that students #26 and #28 had completed the Program, and on or about October 5, 2011, she had sent the Board completion certificates for students #26 and #28. Review of the final grades for students #26 and #28 revealed that there were no grades recorded for either "RN002 Pharmacology" or "RN005 Comprehensive" courses. Review of the course laboratory and clinical evaluation forms for students #26 and #28, for the first cohort "Gerontology" course revealed that neither student engaged in or were verified in the course objective skills related to post-operative care, parenteral medication, sterile dressing, tracheostomy care and blood transfusions; (iv) Despite the Program's Cancellation and Tuition Refund Policy stated in 2009-2010 School Catalog, 2010-2011 School Catalog/Student Handbook, and 2011-2012 School Catalog/Student Handbook, which indicate that "Refunds shall be made within thirty days after the school has determined that a student has withdrawn," as of the date of the survey visit, the Program had not refunded monies paid by withdrawn student #32, despite the fact that the individual had requested a refund three times since August 2011; and (v) Despite the fact that the Program is required to establish and implement written policies for payment of fees and expenses associated with the Program, the Program's 2011-2012 School Catalog/Student Handbook did not contain a policy regarding 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: (1) Student admission; (4) Student progression, which shall include the following: (a) The level of achievement a student must maintain in order to remain in the program or to progress from one level to another; (5) Requirements for completion of the program; (6) Payment of fees, expenses, and refunds associated with the program.

- d. Despite being required by Rule 4723-5-13, OAC, The Program Administrator did not implement the curriculum as written, as follows:
- (i) The syllabus for “RN002 Nursing Transition from LPN to RN Medical Surgical Course” required sixteen (16) laboratory hours as part of a total of 190 course hours. Board staff was provided a “Lab Evaluation Checklist-RN002 Nursing Transition from LPN to RN” which listed student skill competencies to be determined in performing the laboratory hours. During the survey visit, Board staff asked for documentation of completion of the sixteen (16) laboratory hours by the students in the first, second and third Program cohorts. Neither the Program Administrator or Assistant Director was able to provide any documentation to Board staff showing that any of the students in any of the cohorts had completed the sixteen (16) laboratory hours; (ii) Board staff were provided a Lab and Clinical Skills Evaluation form for the first Program cohort for “Gerontology” that required that: “VERIFICATION DATA MUST APPEAR IN EITHER LAB OR CLINICAL COLUMN”. A review of the Lab and Clinical Skills evaluation forms for the following students indicated that:

- Students #16, #17, #19, #23, #26, and #28-30 were not verified in the provision of post-operative care, parenteral medication, tracheostomy care, or the administration of blood transfusions;
- Students #16, #23, #26 and #28-30 were not verified in their application of sterile dressings;

and (iii) The Program failed to provide Board staff any clinical performance evaluations for first cohort students #18, #20, #21, #22, #24 and #27.

Rule 4723-5-13, OAC, states that (A) The registered 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 registered nursing, as defined in division (B) 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; (F) The curriculum shall consist of course content in nursing

art and science, the physical biological and technological sciences, and social and behavioral sciences. This content may be integrated, combined, or presented as separate courses as follows: (8) Clinical and laboratory experiences that: (a) Meet the established course objectives or outcomes; (b) Provide a nursing student with the opportunity to practice cognitive, psychomotor, and affective skills in the performance of a variety of nursing functions with individuals or groups across the life span; (c) Provide a nursing student with the opportunity to practice technical skills including skills pertaining to intravenous therapy.

- e. 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 demonstrate data was collected and summarized by the Program Administrator to establish a systematic plan of evaluation that would include data collected from faculty, instructional personnel, nursing students, graduates and employers of graduates.

Rule 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 4723-5-10 of the Administrative Code for a registered 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 4723-5-13 of the Administrative Code for a registered 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.

- f. Despite being required by Rule 4723-5-20, OAC, Program faculty did not plan students' clinical experiences and evaluate student clinical performance; clinical nursing experiences were not assigned by faculty

based on course objectives and student learning needs; students' nursing care to individuals or a group of individuals were not performed under the direction of a faculty member who evaluated the students' experience, achievement, and progress in relation to the clinical objectives or outcomes as required by Rule 4723-5-20, as follows: During the survey visit, Board staff requested a copy of all clinical evaluations for all clinical courses, for all students in the first through third cohorts. (i) For the first Program cohort, the Program failed to provide any clinical evaluations for students # 18, 20, and 24; (ii) For the second Program cohort, the Program failed to provide any clinical evaluations for student #35; (iii) For the third cohort, the Program failed to provide any clinical evaluations for any students; (iv) The Program provided incomplete evaluations for first Program cohort students in "Gerontology", as set forth in Item 1. d. ii., above; (v) The evaluations that were provided did not consistently state the course to which the student's clinical experience correlated or the location where the clinical experience occurred; (vi) Documentation provided revealed the Program did not provide qualified faculty to evaluate the second cohort students' #33, #34, and #36-52 in their experience, achievement and progress in relation to the clinical objectives; and (vii) During the survey visit, when Board staff requested a schedule showing which facility students were to report to for clinical experiences, and who supervised the students at the facility, the Assistant Director of the Program stated, "I do not know how the students know where to report for clinical experiences."

Rule 4723-5-20(A) and (C), OAC, state that a faculty member of a nursing education program is responsible for planning the student's clinical experience and for evaluating the student's performance. Clinical nursing experiences are assigned by faculty based on course objectives and student learning needs. Faculty or instructional personnel shall supervise student practice by providing guidance, direction, and support appropriate to the clinical situation. (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.

- g. Despite being required by Rule 4723-5-21, The Program Administrator did not develop and implement a record retention plan as required by Rule 4723-5-21, OAC, as follows: (i) The files for students #1-15 did not contain documentation that the students met the Program's admission requirements; (ii) The files for students #18, #20, #24 and #35 did not contain records of clinical experience evaluations; (iii) The

files for students #26 and #28, whom the Program designated as successfully completing the Program, did not contain complete transcripts; and (iv) The file for faculty and/or teaching assistant Karen Tedder did not contain an academic transcript or documentation that her licensure was verified, and the file for Katherine Penty did not contain an academic transcript.

Rule 4723-5-21, OAC, states 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: (1) Admission or transfer records; and (3) Clinical experience evaluation records; (B) Records for all graduates of the program that shall include complete transcripts indicating the credential granted and the date of completion of the program; (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

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.

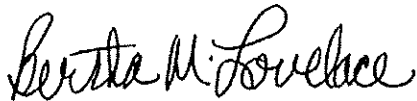
Should you choose to request a hearing, please mail or deliver the request, in addition to any other correspondence regarding this matter, to **Lisa Ferguson-Ramos, Compliance Unit**

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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,



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

Certified Mail Receipt No. 7011 1150 0002 0937 3772

Attorney Certified Mail Receipt No. 7011 1150 0002 0937 3789

cc: Michelle Sutter, Assistant Attorney General
Elizabeth Y. Collis, Esq.