

**Report of Survey Visits
 Kaplan College – San Antonio
 Vocational Nursing Educational Program**

Summary of Request:

Consider the report of the focused survey visits on July 6, 2010 and September 1, 2010 to Kaplan College – San Antonio Vocational Nursing Educational Program in San Antonio, Texas related to: 1) complaints received by Board staff; and 2) pattern of substandard NCLEX-PN Pass Rates.

Historical Perspective:

Year	BON Approval Status	NCLEX-PN Pass Rate	Number of First-Time Candidates (Passed/Total)
partial 2010 (1/1/10 - 9/30/10)	Full with Warning	75.65%	146/193
2009	Full with Warning	69.41%	177/255
2008	Full	68.47%	139/203
2007	Full	85.23%	127/149
2006	Full	78.69%	48/61
2005	Full	90.14%	64/71

- Based on the 2006 NCLEX-PN Pass Rate of 78.69%, the program submitted a Self-Study Report in August 2007. The 2007 Pass Rate increased to 85.23%.
- With a 2008 Pass Rate of 68.47%, the program submitted an additional Self-Study Report in August 2009. The 2009 Pass Rate remained below the 80% required by Rule 214.4(c)(2)(A). A pass rate of less than 80% for two consecutive years prompts a Survey Visit by Board staff.
- The current partial 2010 Pass Rate for the program is 75.14%.
- Based on a complaint of Nursing Jurisprudence Examination (NJE) irregularities received in Board offices on July 3, 2010, Board staff conducted an unannounced focused visit to the program on July 6, 2010 to investigate circumstances surrounding reported gathering of students in a classroom to complete the NJE as a group effort.
- Board staff subsequently conducted a second unannounced focused survey visit to the program on September 1, 2010: 1) to follow up on the July 6, 2010 visit; 2) as directed by the Board of Nursing at the July 2010 meeting; and 3) in response to a complaint from a former faculty member related to administration changing final course grades without notifying the faculty member. This was a joint visit with Texas Workforce Commission staff.

Survey Visit Findings:

- To avoid redundancy, please see Attachment #1 for July 6, 2010 visit.
- Please see Attachment #2 for September 1, 2010 visit.

Pros and Cons:Pros:

- An experienced Clinical Coordinator was recently hired to manage clinical learning experiences.

Cons:

- Significant areas of noncompliance with Education Rule 214 are evident.
- Lack of stability related to frequent administrative turnover.
- Faculty turnover with no organized orientation process.
- A number of new faculty with no teaching experience.
- Lack of organized and consistent supervised clinical learning experiences for students.
- Lack of clarity on clinical objectives that can be met with lab and simulation activities and which must be met with supervised, hands-on clinical practice.
- Multiple student program schedules resulting in complex and difficult management situation.
- Lack of faculty input into processes and decision-making.
- Lack of student input into processes and decision-making.

Staff Recommendation:

Board staff have proposed the following recommendation but seek Board counsel and discussion about the recommendation.

Move to accept the Survey Visit Reports and issue the requirements in the attached letter (Attachment #3).

**Survey Visit – July 6, 2010
Summary Report**

Name of Nursing Program:

Kaplan College – San Antonio Vocational Nursing Educational Program

Nursing Program Director:

Michael Tomak, MSN, RN, Director

Reason for Survey Visit:

To conduct a focused survey visit subsequent to a report received by Board staff related to irregularities in Nursing Jurisprudence Examination (NJE) testing.

Date(s) of Survey Visit:

July 6, 2010

Survey Visitor(s):

Paul R. Waller, PhD, RN, Nursing Consultant for Education
Virginia Ayars, MS, RN, Nursing Consultant for Education
Skylar Caddell, RN-BC, Legal Nurse Investigator

Texas Board of Nursing (BON) Approval Status:

Full (at time of visit; changed to Full with Warning at the July 2010 Board meeting)

Date of Last BON Survey Visit:

December 29, 2008

Name(s) of Accrediting Agencies:

Licensed by the Texas Workforce Commission (TWC)
Accredited by Council on Occupational Education (COE)

Activities During Survey Visit:

Board staff:

- met with the school administration-Director of Nursing Michael Tomak, MSN, RN and Campus Administrator Lisa Ramirez;
- met with two separate groups of nursing students; and
- conducted an exit conference with the Director of Nursing and the Campus Administrator.

Survey Visit Findings:

NJE testing irregularities:

Board staff met with two separate groups of nursing students nearing completion of their program and due to take the Board's Nursing Jurisprudence Examination (NJE). The first student group described a process wherein they were assembled as a group in a computer classroom to complete the NJE, and they logged on to the Board's NJE. One student's computer was arranged with a projector and room screen on which the test could be projected. Students thus were able to discuss test items and responses with faculty input as they completed the exam with faculty input.

The second group of students indicated they were assembled in a separate room for the testing, but they completed all testing independently in a "proctored" setting with a faculty member managing the setting. All

student efforts were reportedly individual, without discussion of test items or content.

Program Director Tomak indicated that he had instructed faculty for the two groups to assemble students in computer classrooms to complete the NJE in the group setting, but that he did not intend for students to work on the exam as a group effort. His intent, as related to Board staff, was to provide a setting in which students could readily log on and complete the exam, facilitating the task for some students who might not otherwise have adequate computer access or uninterrupted time.

NOTE: The matter was referred to the Board of Nursing Enforcement Department. Except for one pending student, the students who completed the exam in the “group” setting have subsequently completed the NJE independently.

Other concerns raised by students:

Incidental to the meetings with students, they reported that clinical learning experiences included “simulation” conducted by faculty who were ill-prepared to deal with manikins and skills equipment. They stated that apparently only one faculty member was adequately prepared to work with the manikins, and the manikins were in poor condition.

Students also related that when a clinical faculty member was unable to attend clinical, the students assigned to that clinical group, along with another clinical group were required to report to the school campus for supervision by the second clinical instructor. No apparent plans were in place for substitute clinical instructors to fill in when the primary instructor was ill or otherwise unable to attend clinical. Subsequently, clinical learning opportunities were lost. Make-up hours were conducted in the computer lab as virtual clinical excursions.

**Survey Visit – September 1, 2010
Summary Report**

Name of Nursing Program: Kaplan College – San Antonio Vocational Nursing Educational Program

Nursing Program Director: Sheila Burke, MSN, MBA, RN, Interim Director, and Dean, Kaplan Higher Education School of Nursing

Reason for Survey Visit: To conduct a focused Survey Visit subsequent to: 1) the prior July 6, 2010 Survey Visit; 2) a pattern of substandard NCLEX-PN Pass Rates; and 3) faculty complaint received by Board staff.

Date(s) of Survey Visit: September 1, 2010

Survey Visitor(s): Paul R. Waller, PhD, RN, Nursing Consultant for Education
Janice Hooper, PhD, RN, Nursing Consultant for Education
Virginia Ayars, MS, RN, Nursing Consultant for Education

NOTE: This was a joint visit with Texas Workforce Commission (TWC) staff member Timothy Wauson.

Texas Board of Nursing (BON) Approval Status: Full with Warning (July 2010)

Date of Last BON Survey Visit: July 6, 2010

Name(s) of Accrediting Agencies: Licensed by the Texas Workforce Commission (TWC)
Accredited by Council on Occupational Education (COE)

Activities During Survey Visit:

Board staff:

- met with the school administration—Interim Director of Nursing Sheila Burke and Campus Administrator Laura Bledsoe (the prior VN Program Director and Campus Administrator had both resigned since prior site visit on July 6, 2010);
- met separately with Interim Director Burke;
- met with a small group of nursing faculty;
- met with a group of nursing students; and
- conducted an exit conference with the Interim Director of Nursing and the Campus Administrator.

Prior to the survey visit, Board staff reviewed in-house file documents including the August 2009 Self-Study Report, the 2009 NEPIS, and the 2009 CANEP.

Survey Visit Findings:

Findings from the meetings, interviews, and review of files and documents:

The program has a current (as of Sept 1, 2010) enrollment of 295 students in three separate cohorts. The curriculum is arranged in four levels described as Quarters 1, 2, 3, and 4, and it may be completed in one of three different schedules. Students enrolled in the “Day” program complete the program in 52 weeks; the “Evening” students in approximately 63 weeks; and the “Weekend” students in 88 weeks. The didactic and clinical experiences are not consistent across these three tracks because of differences in scheduling and in the numbers of weeks in each track.

Ms. Burke indicated there are no plans for continuing the Weekend program. A Day cohort is planned to start Monday, October 25, 2010. A small Evening cohort is planned for a November 2010 start.

The 2009 NEPIS annual report for the program indicates 335 students were enrolled during the time period September 2008 through August 2009. VN Program Interim Director Burke and Campus Administrator Bledsoe indicated they were working on future budgets with projections of 235 students for 2010 and 200 students for 2011, with three months separation between starts of new student cohorts.

A current faculty list indicates 29 faculty members plus VN Program Interim Director Burke. Of those 29 faculty, 16 were listed on the program's 2009 NEPIS Faculty Profile in October 2009; 13 were new hires after September 2009 or later. The headcount of 29 is down from 48 faculty reported at the time of the 2009 NEPIS; Interim Director Burke indicated that an optimum faculty size would likely be 40, with some being part-time faculty. (NOTE: The 2009 NEPIS included an additional 16 faculty, no longer employed, who taught in the program during some portion of the 2008-2009 reporting year.) Interviews are currently being conducted to hire four new faculty.

Nursing Jurisprudence Examination (NJE) testing irregularities:

A July 19 letter (immediately prior to the July Board Meeting) from VN Program Interim Director Burke to Board staff indicated "a commitment to re-administer the NJE to 19 students, which re-administration will take place on July 21, 2010." At the time of the September 1, 2010 visit, Interim Director Burke indicated that students required to repeat the NJE were simply instructed to "do it on your own." No gathering of students was arranged. Of 19 students required to repeat the exam, only one has not yet completed that requirement (as of 9/24/2010), nor has the student completed application to Pearson Vue to take the licensing exam.

A policy and procedure for future administrations of the NJE is reportedly being developed. It was not clearly indicated whether this might include proctored gathering of students to complete the exam or if students will be required to complete the exam on their own time.

Please refer to Requirement #3 in the DRAFT LETTER (Attachment #3 to Board report).

Education Consultant Paul Waller interviewed VN Program Interim Director Sheila Burke.

Program Administration: Ms. Burke indicated she is currently spending 60-70% of her time on-site in San Antonio directly administering the program. In addition, she remains Dean of the Kaplan Higher Education School of Nursing, with responsibility for the Corpus Christi campus as well as all Kaplan nursing programs in other states. She indicated she has an effective administrative team to assist with the diverse responsibilities.

Kaplan staff from other states are assisting with administration of the San Antonio program in areas such as supplies and equipment, as well as remediation efforts for students requiring additional NCLEX preparation and assistance. Interim Director Burke was cautioned about Board rule that faculty must hold current Texas licensure or privilege to practice in the state.

Ms. Burke indicated she has been charged with the following responsibilities: 1) good NCLEX testing outcomes for October 2010 graduates; 2) significant progress on all fronts by the end of December 2010 (e.g., hiring 6-7 new qualified faculty); and 3) improving NCLEX pass rates for both the San Antonio and Corpus Christi programs by the end of 2010. She further shared three primary goals for the San Antonio program as: 1) stability; 2) predictability; and 3) faculty input into processes.

Ms. Burke is the sixth Program Director at the Kaplan College – San Antonio campus within the past approximately 3.5 years. (Former Directors in that time period: A. Schroer; R. Thomas; M. Burch; M. Tomak; and B. Mora.) Similarly, the Corpus Christi campus has had significant turnover of Directors within the past two years. (Former Directors: J. Guerra-Berrera; C. Sparks [acting Director]; M. Tomak; and D. Huddleston.) In addition, Coordinators hired for the planned extension campuses in Houston (D. Junious) and in Dallas and Fort Worth (L. Battle) resigned their positions before the extension campuses were activated.

The most recent Director for the Corpus Christi campus (D. Huddleston) resigned effective June 14, 2010. A candidate was nominated to serve as Interim Director, but having completed her Associate Degree in 2008, she lacked the “five years of varied nursing experience since graduation from a professional educational program” required in Rule 214.6(f)(5). A qualified candidate for Interim Director is reportedly available on the current faculty, but her credentials and documentation have not been forthcoming.

A national recruiting effort is underway to identify qualified Directors and Assistant Directors for the San Antonio and Corpus Christi programs. As she announced at the July 2010 Board Meeting, Ms. Burke is serving as Interim Director of the San Antonio campus until a qualified candidate can be appointed to fill the position on a permanent basis. She indicated a goal of having a permanent Director hired for the San Antonio position by the time of the October 2010 Board meeting, along with a sense that an Interim Director would suffice for the Corpus Christi campus for a while.

Please refer to Requirement #1 in the DRAFT LETTER (Attachment #3 to Board report).

Interim Director Burke projected an ideal faculty workload will likely be 24 hours per week of student contact for full-time faculty, leaving additional time for other responsibilities. Faculty members have been and are currently teaching overloads due to a lack of adequate faculty.

Curriculum and Kaplan Texas-based programs/ campuses: A curriculum change was submitted and approved (June 21, 2010) for the Corpus Christi campus, with planned expansion to Houston, Dallas, and Fort Worth extension campuses. Planned openings of extension campuses in Houston, Dallas, and Fort Worth are on hold, pending quality improvement and stabilization of the existing programs in San Antonio and Corpus Christi, as well as rehiring of qualified administrators to replace staff hired to serve as Coordinators for those locations who have subsequently resigned.

Implementation of the planned curriculum change is being held until stabilization of the Corpus Christi campus can be achieved. Extending use of that curriculum to the San Antonio program had been verbally indicated, but no documentation has been submitted to formalize that intent. Implementation of the new curriculum in San Antonio is reportedly projected for late 2011 at earliest.

Please refer to Requirement #7 in the DRAFT LETTER (Attachment #3 to Board report).

Grading policy: Education Consultant Waller asked Interim Director Burke to explain the grading policy. She stated that grades were determined based upon “the syllabus and work done.” She further indicated that the program had seen a larger number of failures in August 2010 than in typical months.

Ms. Burke explained that students who fail a course are allowed to repeat the course in a later academic term; a second failure of the same course results in termination from the program. In a separate scenario, a student may fail two different courses one time each, yet remain in the program by successfully completing each of those two courses on the second attempt. Failure of a third course, however, results in termination from the program.

When asked about policy for grade changes, Ms. Burke indicated the faculty member and Director sign off on all such changes. Grade changes can be initiated by faculty or by student grievance. There is a central “Academic Compliance Team” that oversees grades.

Board staff then inquired about the specific case of grade changes reported by a former faculty without that faculty member’s consent or participation in the process. Ms. Burke indicated the person in charge tried to talk with the faculty member, and that “nothing underhanded was intended or done.” It was merely a misunderstanding of the use of the computerized grading system, errors were made by the faculty member, and they were being fair. The grades were ultimately allowed to stand as revised, apparently based on review of the “Academic Compliance Team” and without the consent of the former faculty member.

Please refer to Requirement #3 in the DRAFT LETTER (Attachment #3 to Board report).

Education Consultant Janice Hooper interviewed a group of four (4) faculty, who all stated there is a great need for more faculty. The four faculty interviewed have all been hired within the past six months.

Formal orientation for new faculty has not been in place though the Interim Director indicates plans for implementation.

Please refer to Requirement #2 in the DRAFT LETTER (Attachment #3 to Board report).

Faculty who were interviewed reported they supervise students in clinical and described appropriate clinical experiences. A schedule of clinical placements was provided to Board staff. Most of the settings are long term care, one rehabilitation facility, and a day care setting. The maternity clinical is done through simulation.

Quotes from July 27, 2010 faculty minutes:

- “Concerns regarding replacement/makeup clinical: Replacement clinical has to be a simulation experience. Clinical experience cannot be replaced with just ‘seat time.’ SB and KL will assist faculty to identify viable options for designing a clinical replacement experience. VCEs (*Virtual Clinical Excursions*) may be a part of the simulation experience but the value of it will be in the debriefing session. Discussion tabled in the interest of time and will be discussed at a later meeting.” (Note this corroborates student reports at the July visit that “simulation” was used in lieu of hands-on clinical learning experiences when a clinical faculty member was unavailable.)
- “OB clinical will consist of simulation experience beginning next week.”

The clinical experiences for the maternity content presently all involve simulation. Only one faculty member is trained to program the manikin. Concern was expressed by faculty and students for the amount of time devoted to simulation without hands-on care experiences.

Please refer to Requirement #8 in the DRAFT LETTER (Attachment #3 to Board report).

A recently-hired faculty member will begin the Clinical Coordinator role on September 7, 2010. Her full time position will be devoted to management of clinical placements. Board staff interviewed the new Clinical Coordinator about plans for expanding clinical sites and scheduling experiences. She seems reliable and has experience in this role.

Education Consultant Virginia Ayars interviewed a group of approximately 25-30 Level 4 students.

The students indicated there is no effective mechanism in place for student input into the program and perceive a lack of responsiveness to their concerns. They acknowledge and appreciate current efforts being made by corporate administrators, but expressed a sense of an unstable learning environment. The Interim Director reported that the student president of each cohort meets with her for feedback from the classes.

Please refer to Requirements #4 and #5 in the DRAFT LETTER (Attachment #3 to Board report).

Students also indicated they would like to have more hands-on clinical experiences. They reported that pediatric clinical experiences were limited to observational experiences in child day care facilities and included no hands-on opportunities to assess children or to otherwise provide nursing care.

As previously indicated at the July 6, 2010 visit, students reconfirmed that when faculty are unavailable to conduct clinical experiences, that clinical group plus another group with a faculty member available must return to the campus for computer lab exercises including “virtual clinical excursions.” Students also indicated they do not consistently have the opportunity to evaluate faculty or learning opportunities.

Please refer to Requirements #5 and #8 in the DRAFT LETTER (Attachment #3 to Board report).

Students also complained of lost instructional time due to being removed from class to attend to administrative (e.g., financial) issues.

Students indicated a general shortage of equipment and a shortage of working equipment. For example penlights for assessing pupil dilation were inappropriate models, and many sphygmomanometers for blood pressure measurements were nonfunctional.

Please refer to Requirement #9 in the DRAFT LETTER (Attachment #3 to Board report).

Non-required content in intravenous therapy is provided, but again with a shortage of needles and other equipment. Students related that they were being taught to recap needles to conserve supplies, contrary to recognized practice of Universal Precautions.

Please refer to Requirement #6 in the DRAFT LETTER (Attachment #3 to Board report).

DRAFT LETTER

October 25, 2010

Sheila Burke, MSN, MBA, RN
Interim Director
Kaplan College – San Antonio
6441 NW Loop 410
San Antonio, TX 78238

Dear Ms. Burke:

At the October 21-22, 2010 meeting, members of the Texas Board of Nursing discussed the reports of the July 6, 2010 and September 1, 2010 survey visits conducted by Board staff to Kaplan College – San Antonio Vocational Nursing Educational Program. The Board wishes to thank you and **<<INSERT AS NEEDED>>** for being present at the meeting to answer questions. Based upon the discussion and review of documents, it was the decision of the Board to accept the Survey Visit report and issue the following requirements.

REQUIREMENTS:

1. Rule 214.6 related to Administration and Organization: Administration shall develop and implement a comprehensive plan for transition from the current Interim Director to a permanent Program Director and for orientation and mentoring of that individual to assume the role. When a permanent Director is nominated, the detailed plan and position description for Director shall be conveyed to Board staff with submission of the proposed candidate's credentials for review and approval.
2. Rule 214.7(a)(6) related to Faculty: The administration shall assure policies are developed and implemented related to faculty orientation to the institution and the program, faculty development, and faculty evaluation. Policies related to faculty orientation, faculty development, and faculty evaluation shall be submitted to Board staff by Friday, November 19, 2010, along with a schedule for implementation with recently-hired and all new faculty hires going forward. Further, administration shall assess the need for similar orientation and development of current, established faculty.
3. Rule 214.8(d) related to Students: The administration shall provide a copy of the Nursing Jurisprudence Examination administration policy (indicated as in development at the time of the September 1, 2010 visit) along with a plan and schedule for implementation prior to graduation of the next student cohort. Additionally, the administration shall provide to Board staff a copy of the grading policy, including policy for grade changes and any review by the "Academic Compliance Team," by Friday, November 19, 2010.
4. Rule 214.8(i) related to Students: The administration and faculty shall develop and implement processes for student input into development of academic policies and procedures, curriculum planning, and evaluation of teaching effectiveness. Documentation of the processes shall be submitted to Board staff by Friday, December 3, 2010.
5. Rule 214.8(j) related to Students: The administration and faculty shall develop and implement processes for student evaluation of faculty, courses, and learning resources and the evaluations shall be documented. Documentation of the processes shall be submitted to Board staff by Friday, January 7, 2011.
6. Rule 214.9 related to Program of Study: The administration and faculty shall assure the program of study is designed to teach students safe patient care. The faculty shall prepare and submit by Friday, December 17, 2010 a matrix showing incorporation of comprehensive safety standards and their placement within the curriculum, including the Board of Nursing's *Differentiated Essential Competencies of Graduates of Texas Nursing Programs Evidenced by Knowledge, Clinical Judgments, and Behaviors*, Centers for Disease Control and Prevention's Universal Precautions, and Joint Commission's National Patient Safety Goals.

7. Rule 214.9 related to Program of Study: The current faculty shall assess the Curriculum Change previously approved for the vocational nursing program at Kaplan College – Corpus Christi to determine its appropriateness and applicability for the San Antonio program. Board staff shall be formally notified of the determination and any intent to implement a proposed curriculum change. The faculty and administration are strongly encouraged to carefully examine the campus organizational culture and environment to determine if and when any curriculum change should be implemented.
8. Rule 214.10, related to Clinical Learning Experiences: The faculty shall manage clinical learning experiences for students, assuring appropriate affiliating agencies and clinical facilities to meet the objectives of the program of study and requirements of Education Rule 214. Copies of signed current clinical affiliation agreements shall be submitted to Board staff by Friday, November 12, 2010. Ongoing schedules of clinical learning experience placements for all student cohorts including dates and times of clinical experiences, assigned clinical affiliating agencies, and assigned clinical instructor shall be provided to Board staff on an ongoing basis at least three weeks prior to each clinical placement. In addition, program administration shall assure adequate faculty to meet the educational objectives of the program, including plans for substitute clinical instructors as needed [Rule 214.7(n)].
9. Rule 214.11 related to Facilities, Resources, and Services: The administration shall assure appropriate facilities, resources/ materials, and services are available to support the effective development and implementation of the nursing education program. Program administration shall provide certification that the program is in compliance with these requirements.

Requirements are mandatory criteria based on program assessment directly related to the rule that must be addressed in the manner prescribed. Documentation of the address of the above requirements to be met shall be submitted to the Board office at the times identified in each. If you have any questions or if we may be of assistance, please contact Board staff at 512-305-7658 or by email at paul.waller@bon.state.tx.us

Sincerely,

Linda R. Rounds, PhD, RN, FNP
President

Paul R. Waller, PhD, RN
Nursing Consultant for Education

cc: Texas Workforce Commission
Council on Occupational Education
Kaplan College – Corpus Christi