

## AGENDA ITEM #5.E.V



BUSINESS, CONSUMER SERVICES, AND HOUSING AGENCY • GAVIN NEWSOM, GOVERNOR  
**Board of Vocational Nursing and Psychiatric Technicians**  
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<b>DATE</b>	August 21, 2020
<b>TO</b>	<input checked="" type="checkbox"/> Board Members <input type="checkbox"/> Education and Practice Committee <input type="checkbox"/> Executive Officer Review
<b>FROM</b>	<input type="checkbox"/> Education and Practice Committee <input type="checkbox"/> Executive Officer <input checked="" type="checkbox"/> SNEC
<b>REVIEWED BY</b>	Marie Cordeiro, MN, RN Supervising Nursing Education Consultant (SNEC)
<b>PREPARED BY</b>	Cindy Fairchild EdD, MSN, RN, PHN Nursing Education Consultant (NEC)
<b>SUBJECT</b>	Request to Admit Students
<b>PROGRAM</b>	Premiere Career College Vocational Nursing Program (Program) (Director: Ofelia Layugan, Irwindale, Los Angeles County, Private)

Please note: The NECs make recommendations. The recommendations are forwarded to one or more: the Executive Officer Review, the Education and Practice Committee and/or the full Board for action.

### **PROGRAM REQUEST:**

Admit a full-time class of 30 students commencing on October 26, 2020, graduating on December 12, 2021, to replace the February 7, 2020, graduating class.

### **BACKGROUND:**

The Program has been displaced from all clinical sites as of March 15, 2020, due to the COVID-19 pandemic crisis. The Program is currently delivering theory via an online format. Clinical experiences are being conducted primarily in an online simulated format and limited hands-on clinical simulation. The July 2019 class is currently completing 24 hours a week of clinical simulation on campus. The September 2019 class is completing eight hours a week of clinical simulation and the remainder of the clinical hours are in a virtual simulated environment. The Program remains in communication with Board-approved clinical sites as they strive to obtain hands-on clinical experiences.

On February 21, 2020, the Board required the Program to provide one instructor for every ten students in clinical experiences. Fewer students for each clinical instructor enable more focused instruction and enhanced learning and allow the instructor to closely monitor and evaluate the clinical performance of students. Therefore, for a maximum enrollment of 102 students, eleven instructors are needed for clinical supervision

**STAFF ANALYSIS:**

All clinical experiences are being conducted in either a clinical and virtual simulation environment, and skills lab. Thus, the students are not obtaining any clinical experiences in a hands-on clinical environment in a Board-approved clinical site.

The annual NCLEX-PN® pass rate is 62 percent. The annual state average is 79 percent. The Program is 17 percentage points below the state average. The second quarter NCLEX-PN® pass rate is 33 percent.

Continue to require the Program to comply with all approval standards in Article 4 of the Vocational Nursing Practice Act, commencing at Business and Professions Code Section 2880, and Article 5 of the California Code of Regulations, Title 16.

**STAFF RECOMMENDATIONS:**

Please note: These are not NEC decisions, rather the recommendations presented at the Executive Officer Review, the Education and Practice Committee and/or the full Board for action.

1. Deny the Program's request to admit a full-time class of 30 students commencing on June 1, 2020, graduating on October 26, 2020, graduating on December 12, 2021, to replace the February 7, 2020, graduating class.
2. Place the Program on the February 2022 Board agenda for reconsideration of provisional approval.
3. Comply with all program requirements listed below.

**PROGRAM REQUIREMENTS:**

1. Program director to notify the NEC when current students return to a Board- approved clinical site for clinical experiences.
2. Program director to notify the NEC when a course is 50 percent complete, and submit an update related to clinical experiences.
3. Submit a comprehensive analysis to the Board no later than September 21, 2020. The report must include a comprehensive analysis of the Program, timeline for implementation, and the effect of employed interventions. The elements below must be addressed in the analysis.

- a. Terminal objectives
  - b. Evaluation of current curriculum including:
    - Instructional plan
    - Theory objectives for each term
    - Clinical objectives for each term
    - Lesson plans for each term
  - c. Student Policies including:
    - Admission policy
    - Screening and selection policy
    - Attendance policy
    - Remediation policy
    - Evaluation of student achievement
    - Credit granting policy
  - d. Evaluations of approved clinical facilities which determine adequacy in number and variety of patients to accommodate current and projected students.
  - e. Evaluations of faculty
  - f. Methodologies for:
    - Faculty meetings
    - Clinical evaluations
  - g. Plan to increase the number of students who pass the exit exam.
  - h. Plan to improve NCLEX-PN® pass rates
4. Provide no less than one instructor for every ten students in clinical experiences. Regulation 2534 (d) states, "For supervision of clinical experience, there shall be a maximum of 15 students for each instructor".
  5. Obtain Board approval prior to the admission of additional students.
  6. When requesting approval to admit students, to:
    - a. Submit all documentation in final form, no later than two months prior to the requested start date for the class.
    - b. Provide documentation demonstrating adequate resources, i.e. faculty and facilities, are available to support each admitted class of students.
    - c. Ensure that the Program maintains an average annual pass rate that is compliant with Section 2530(l) of the Vocational Nursing Rules and Regulations.
  7. Comply with all approval standards in Article 4 of the Vocational Nursing Practice Act, commencing at Business and Professions Code, section 2880, and Article 5 of the Board's Regulations, commencing at California Code of Regulations, Title 16, section 2526.
  8. Board staff will continue to closely monitor the Program's progress by monitoring the program reports, resources and the program's annual average pass rates.

9. Failure to take any of these corrective actions may cause the full Board to revoke the Program's approval.

## **RELEVANT PROGRAM ELEMENTS**

### **Enrollment**

Section 2530(k) of the Vocational Nursing Rules and Regulations states:

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

The Program offers full-time day and evening classes that are 60 weeks in length. The Program is Board-approved for two full-time day classes of 30 students, and two full-time evening classes of 30 students per calendar year. Board approval is required prior to admission of each class.

The following table represents current student enrollment based on the current class starts and completions. The table indicates a maximum enrollment of 102 students for the period January 2019 through October 2020.

<b>ENROLLMENT DATA</b>				
<b>CLASS DATES</b>		<b>#Students Admitted</b>	<b>#Students Current or Completed</b>	<b>Total Enrolled</b>
<b>Start</b>	<b>Complete</b>			
1/19 FT Day *[5/20]**		29	19	19
	5/20 [1/19]		19	19-19 = 0
4/19FT Day *(8/20)***		22	29	29
7/19 FT Eve *[9/20]		30	22	29 + 22 = 51
9/19 FT Day *[11/20]		30	21	51 + 21 = 72
10/20 FT eve *[12/2021] Proposed		30		72 + 30 = 102
* [ ] Indicates projected completion date. ** February 2020 program completion delayed until May 2020 due to COVID-19 *** June 2020 program completion delayed until August 2020 due to COVID-19				

## **Licensing Examination Statistics**

California Code of Regulations Section 2530(l) states:

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

The following statistics, furnished by Pearson VUE and published by the National Council of State Boards of Nursing as “Jurisdictional Summary of All First-Time Candidates Educated in Member Board Jurisdiction” for the period April 2018 through June 2020, specify the pass percentage rates for graduates of the Program on the National Council Licensure Examination for Practical/Vocational Nurses (NCLEX-PN®) and the variance from state average annual pass rates.

NCLEX-PN® Licensure Examination Data							
Quarterly Statistics				Annual Statistics*			
Quarter	# Candidates	# Passed	% Passed	State Average Quarterly Pass Rate	Program Average Annual Pass Rate	State Average Annual Pass Rate [CCR §2530(l)]	Variance from State Average Annual Pass Rate
Apr-Jun 2018	15	15	87%	79%	77%	76%	+1
Jul-Sep 2018	9	9	67%	77%	76%	76%	0
Oct-Dec 2018	7	7	71%	79%	77%	79%	-2
Jan-Mar 2019	21	21	57%	80%	69%	81%	-12
Apr-June 2019	20	20	75%	83%	67%	81%	-14
July-Sep 2019	14	14	50%	79%	63%	79%	-16
Oct-Dec 2019	13	13	62%	79%	62%	79%	-17
Jan-Mar 2020	7	7	100%	78%	69%	79%	-10
Apr-Jun 2020	3	1	33%	81%	62%	79%	-16

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

Based on the most recent data available (April through June 2020), the Program’s average annual pass rate is 62 percent. The California average annual pass rate for graduates from approved vocational nursing programs who took the NCLEX-PN® Licensure Examination for the first time during the same period is 79 percent. The average annual pass rate for the Program is 17 percentage points below the state average annual pass rate.

## **Faculty and Facilities**

Section 2534(d) of the Vocational Nursing Rules and Regulations states:

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

The total number of Board-approved faculty is 20, including the director, and three additional faculty. The director has 60 percent administrative and 40 percent teaching duties. Sixteen instructors are designated to teach clinical. For a maximum enrollment of 102 students, eleven instructors are needed for clinical supervision. The utilization of faculty at clinical facilities is such that the clinical instruction is covered adequately.

Section 2534(b) of the Vocational Nursing Rules and Regulations states:

“Schools shall have clinical facilities adequate as to number, type, and variety of patients treated, to provide clinical experience for all students in the areas specified by Section 2533. There must be available for student assignment, an adequate daily census of patients to afford a variety of clinical experiences consistent with competency-based objectives and theory being taught.”

Due to the COVID-19 pandemic, all of the Program’s Board-approved clinical facilities have displaced students, thereby not allowing student access to the clinical site. The Program is currently utilizing online theory and clinical experiences via virtual simulation to meet program objectives. The students do not have the ability to practice psychomotor or communication skills in the clinical setting.

### **Other Considerations**

#### **Social Distancing Compliance:**

Skills lab configuration to allow for social-distancing.

The Program has converted two classrooms into skills labs. With the conversion of the classrooms to skills lab the Program has three rooms for skills. To maintain social distancing there are five students and one faculty member per room.



#### **Faculty training for online education:**

- Faculty members received professional development training in the following areas:
  - Zoom Navigation
  - Online Teaching Strategies
  - Teaching Online – A Student-Centered Approach

- ATI
- Proctoring Assessment with Proctorio

### **Ongoing attempts to reestablish clinical sites:**

- On June 6, 2020, the program director submitted correspondence with seven Board-approved clinical sites. The sites were unable to schedule the Program for clinical experiences. (Attachment B)
- On July 28, 2020 the program director submitted the following information to the NEC.
  - None of our students are currently in any of our affiliate clinical sites. Most of our clinical affiliates have denied the acceptance of students in their patient care units. We have been in constant communication with most of our clinical sites to see if clinical rotation is possible. For most of the affiliate clinical sites, we were told that clinicals will be on hold until further notice.
  - The only hospital in our list of affiliates that have expressed willingness to allow students in the clinical sites; however, the testing and clearance requirement for COVID-19 and other factors and restrictions imposed on the clinical experience of the students due to COVID-19 do not support the clinical goals and objectives for the term assigned to have their clinical rotation in the aforementioned clinical site.
  - The medical center has never halted any clinical rotations, the impact of COVID -19 has suspended the on-boarding of new students. Our school was affected by this due to the fact that the students were not able to complete the paperwork and other requirements for on-boarding when the clinical affiliate site announced that those who have not completed the on-boarding process will not be able to come back to the medical center until the COVID -19 pandemic has subsided. (Attachment C)

### **Lack of Board approved hands-on clinical facilities:**

- On July 30, 2020 the program director submitted the following to the NEC:
  - As previously stated in our request for a new class, we will continue to monitor for availability of our clinical sites for clinical rotation but in the event that the sites remain unavailable by the time the two cohorts complete 50 % of simulation, we will continue to frontload the theory portion of the term and consider Telehealth as an option. Otherwise, per the general provision of the CARES ACT, “students who are in term-based institutions who are unable to continue with the completion of the program requirements due to COVID-19 related circumstances will have to be put on a leave of absence and resume training at the same point in the program when available.” (Attachment D)

### **NCLEX-PN® Pass Rate Improvement**

On May 24, 2019, the program director submitted a plan to improve NCLEX-PN ® pass rates. At this time the Program reviewed admission policies and attendance. Test

taking strategies were introduced into term one, as well as a mandatory review program.

On October 22, 2019, the program director submitted an updated plan to improve NCLEX-PN® pass rates. The updated plan included interviews with potential students, the implementation of ATI, monitoring attendance and academic progress, along with an exit exam.

On October 29, 2019, the program director submitted the policy for ATI.

On November 6, 2019, the program director submitted the updated syllabi for all terms to include ATI, along with the college catalog, and student handbook.

The first students to graduate utilizing ATI will be in September 2020.

On July 27, 2020, program director submitted an update on the NCLEX-PN® improvement plan.

## **Graduates**

The class scheduled to graduate December 2019, completed the program February 7, 2020, after making up all unscheduled clinical hours, and clinical hours from an unapproved clinical site. The class started with 29 students; 19 students completed the Program. An exit exam was given to the 19 students with two opportunities to pass the exam. The exit exam was passed by 10 students. The class had a 65 percent completion rate, while 52 percent of the students who completed the Program are considered graduates.

The class scheduled to graduate in February was delayed due to delays in clinical experiences as a result of COVID-19, therefore completed the Program May 28, 2020. The class started with 30 students and 24 students complete the program. Nineteen students passed the exit exam on the first attempt. The remaining five students did not pass the exit exam on either attempt, therefore are considered completers (Attachment C). The class had an 80 percent completion rate, and 79 percent of the students who completed the Program are considered graduates.

## **Program Analysis and Improvement Plan:**

On January 22, 2020, an improvement plan was submitted to the NEC.

On April 3, 2020, the NEC submitted a request for an update on the implementation of the improvement plan to be submitted by April 10, 2020.

On April 10, 2020, the NEC received the requested update on the implementation of the improvement plan.

On September 21, 2020, the program director must submit a comprehensive analysis.



## **Prior Violations:**

On October 17, 2019, a site visit was conducted in conjunction with the Program Record Survey (PRS). One violation was identified related to the screening and selection process. The prior program director stated that she conducted interviews, however she did not document the interviews.

On October 24, 2019, a student complaint was received. The complaint alleged that students are harassed by faculty, faculty concerns related to delivery of theory content, and students not attending clinicals. During the investigation three violations were identified.

The first violation was the failure to meet the Board-approved clinical hours. The students were scheduled for 144 hours of clinical experiences instead of 288 hours. The 144 clinical hours were completed January 19, 2020, which delayed graduation by approximately 5-6 weeks.

The second violation was the use of a clinical site that was Board-approved for clinical make-up hours only. The program director submitted a new facility application requesting the clinical site be considered a regular clinical site instead of a make-up only clinical site. The facility was Board-approved on December 5, 2019. The students who attended the clinical site during the time the site was approved as a make-up only site made up the clinical hours.

The third violation was the lack of clinical sites. The Program had approved obstetrics (OB) and pediatric clinical sites to accommodate a total of 22 students, while the class had 24 students. On December 5, 2019, the program director submitted applications, and the NEC approved the application, for additional OB and pediatric clinical sites giving the Program the adequate clinical sites.

The program has corrected three out of the four violations.

Given the foregoing, the following violation has not been corrected:

Violation # 4      The Program's screening and selection criteria includes an interview with the program director. The program director states that she has been conducting the interviews, but she has not documented the interviews. A form was created during the NECs site visit, trialed by the current pre-vocational nursing students. The form has not been implemented for interviewing potential students.

Status:              The violation is not corrected.

Update:              The interview documentation form has been created and will be utilized with the next Board-approved class start.

**ATTACHMENTS:**

Attachment A: History of Prior Board Actions

Attachment B: Clinical Site Correspondence

Attachment C: Attempts to reestablish clinical sites and exit exam

Attachment D: Follow up with facility

Attachment E: Lack of clinical sites

## AGENDA ITEM #5.E.V

### PREMIERE CAREER COLLEGE VOCTIONAL NURSING PROGRAM

#### History of Prior Board Actions

- On February 20, 2004, the Board approved Premiere Career College's request to begin a vocational nursing program with an initial class of 30 students on March 8, 2004, only, and approved the program's curriculum to include 1568 hours, including 586 theory, and 982 clinical hours.

Commencement of the initial class was delayed to June 2004.

- On February 4, 2005, the Board approved initial full accreditation for the Premiere Career College Vocational Nursing Program for the period February 4, 2005, through February 3, 2009, and issued a certificate accordingly; **and** approved the program's request to **replace** students graduating May 20, 2005, with 30 students on June 6, 2005, only.
- On September 16, 2005, the Executive Officer approved the program's request to admit an additional full-time class of 30 students on November 21, 2005, only.
- On May 12, 2006, the Executive Officer approved the program's request to admit a class of 30 students on June 5, 2006, only, to **replace** students graduating on May 19, 2006.
- On October 3, 2006, the Executive Officer approved the program's request to admit a class of 30 students on November 20, 2006, only, to **replace** students graduating on November 3, 2006.

The Executive Officer also approved the program's request for ongoing admissions to **replace** graduating classes, only, with the stipulations that no additional classes are added to the program's current pattern of admissions without prior Board approval, and that the director documents that adequate resources are available to support each admitted class of students.

- On July 2, 2008, the Executive Officer approved the program's request to admit 30 students to a class commencing November 10, 2008, with an anticipated graduation date of October 23, 2009; and approved ongoing admissions to **replace** graduating classes only be approved with the following stipulations:

- a. No additional classes are added to the program's current pattern of admissions without prior approval. The program's current pattern of admissions includes admission of three full-time classes of 30 students per year.
  - b. The director documents that adequate resources, i.e. faculty and facilities, are available to support each admitted class of students.
- On September 20, 2010, the Executive Officer approved Premiere Career College Vocational Nursing Program's request to admit 30 students four (4) times per year to **replace** graduating students only, with the following stipulations:
    - a. No additional classes are added to the program's current pattern of admissions without prior approval. The program's current pattern of admissions includes admission of four (4) full - time classes of 30 students per year to **replace** graduating students only.
    - b. The director documents that adequate resources, i.e. faculty and facilities, are available to support each admitted class of students.
  - On February 4, 2013, the director was notified the program had four (4) quarters of low licensure pass rates. The director was required to submit a plan to improve the programs licensure pass rates by March 5, 2013.
    - On March 2, 2013, the director submitted her plan to improve licensure pass rates.
    - On May 7, 2013, the director was notified the program had five (5) quarters of low licensure pass rates. The director was required to submit a plan to improve the programs licensure pass rates by May 31, 2013.
    - On May 3, 2013, the Executive Officer continued full approval for the Premiere Career College Vocational Nursing Program for the period February 4, 2013, through February 3, 2017, and issued a certificate accordingly; **and, revoked** the programs ongoing admission pattern; **and,** required the program to obtain Board approval prior to the admission of additional students.
    - On May 20, 2013, the Executive Officer denied Premiere Career College's request to admit a class of 30 students on June 24, 2013; graduating June 6, 2014. This class would have **replaced** students that will graduate on June 7, 2013; and, approved the program's admission of a class of 15 students on June 24, 2013, only; graduating June 6, 2014. This class will **replace** students that will graduate on June 7, 2013; **and,** required the program to submit a written report **by June 12, 2013**. The report must include a comprehensive analysis of the program, specific actions taken to improve program pass rates, timeline for implementation, and the effect of employed interventions. The following elements must be addressed in the analysis.
      - a. Admission Criteria.
      - b. Screening and Selection Criteria.

- c. Terminal Objectives.
- d. Curriculum Objectives.
- e. Instructional Plan.
- f. Theory and Clinical Objectives for Each Course.
- g. Lesson Plans for Each Course.
- h. Textbooks.
- i. Attendance Policy.
  - j. Remediation Policy.
  - k. Evaluations of Theory and Clinical Faculty.
  - l. Evaluations of Theory Presentations.
  - m. Evaluations of Clinical Rotations and Their Correlation to Theory Presentations.
  - n. Evaluation of Student Achievement.
  - o. Current Enrollment; **and,**

Required the program to obtain Board approval prior to the admission of additional students.

- On June 17, 2013, the director submitted the comprehensive analysis required above. The analysis was inadequate as presented. The director was given guidance on how to complete the analysis. A new due date of September 13, 2013 was given.
- On July 29, 2013, the director was notified the program has six (6) quarters of low licensure pass rates. The director is required to submit proof that the plan identified above is being implemented by August 16, 2013.
- On August 27, 2013, the Board received the program's documentation verifying the plan to improve graduate's licensure pass rates had been implemented.
- On September 17, 2013, the Board received the program's revised comprehensive analysis.
- On September 19, 2013, the Board approved Premiere Career College Vocational Nursing Program's request to admit a class of 15 students on September 23, 2013, only; graduating November 21, 2014. This class **replaces** students that graduated on August 30, 2013; and, required the program to obtain Board approval prior to the admission of additional students.
- On October 30, 2013, the director was notified the program has seven (7) quarters of low licensure pass rates. The director is required to submit an evaluation of her plan to bring up the program's licensure pass rates by November 15, 2013.
- On November 13, 2013, the director re-submitted the comprehensive analysis.

- On December 6, 2013, the Executive Officer considered the program's request for approval to admit a class of 15 students on January 6, 2014. The request was denied, and the program was required to obtain Board approval prior to the admission of additional students. Additionally, the Executive Officer directed that the program be placed on the Board's February 2014 agenda for consideration of placement on provisional approval.
- On December 10, 2013, Board representatives, SNEC and assigned NEC, conducted a teleconference with program representatives relative to their request. Participating program representatives included Fe Aragon, President, Owner; Enrique Aragon, Vice President; Rowena Gabriel, Director of Student Services; and Jennifer Ty DeGuzman, Program Director.
- On December 11, 2013, the Board received correspondence from the owner, Fe Aragon, advising that the program director, Jennifer Ty De Guzman, was no longer employed at the school.
- **On December 20, 2013, the Board approved a new director.**
- On February 28, 2014, the Board placed Premiere Career College on provisional approval for a two (2) year period from February 28, 2014, through February 28, 2016 and issue a notice to the program identifying specific areas of noncompliance and requirements for correction as referenced in Section 2526.1 (e) of the California Code of Regulations; **and**, required the program to admit no additional classes without prior approval by the full Board; **and**, required the program to bring its average annual pass rate to no more than ten (10) percentage points below the State average annual pass rate; **and**, advised the program it shall obtain approval of the full Board prior to the admission of additional students; **and**, the program shall submit a follow-up report in 9 months, but no later than **November 1, 2014** and 21 months, but no later than **November 1, 2015**. The report must include a comprehensive analysis of the program, specific actions taken to improve program pass rates, timeline for implementation, and the effect of employed interventions. The following elements must be addressed in the analysis:
  - a. Current Student Enrollment.
  - b. Admission Criteria.
  - c. Screening and Selection Criteria.
  - d. Terminal Objectives.
  - e. Curriculum Objectives.
  - f. Instructional Plan.
  - g. Theory and Clinical Objectives for Each Course.
  - h. Lesson Plans for Each Course.
  - i. Textbooks.
  - j. Attendance Policy.
  - k. Remediation Policy.
  - l. Evaluations of Theory and Clinical Faculty.
  - m. Evaluations of Theory Presentations.

- n. Evaluations of Clinical Rotations and Their Correlation to Theory Presentations.
- o. Evaluation of Student Achievement; **and**,

The program shall comply with all approval standards in article 4 of the Vocational Nursing Practice Act, commencing at Business and Professions Code section 2880, and article 5 of the Board's regulations, commencing at California Code of Regulations, title 16, section 2526; **and**, the program shall demonstrate incremental progress in correcting the violations. If the program fails to satisfactorily demonstrate incremental progress, the full Board may revoke the program's approval; **and**, failure to take any of these corrective actions may cause the full Board to revoke the program's approval.

- On March 12, 2014, the director submitted her plan to improve licensure pass rates.
  - On March 20, 2014, the Board forwarded to the Director the Notice of Change of Approval Status.
  - On March 27, 2014, the Board received the Director's Acknowledgement of Change in Approval Status.
- On May 16, 2014, the Board denied Premiere Career College Vocational Nursing Program's request to admit a day class of 30 students commencing on May 19, 2014, graduating July 24, 2015, to **replace** students that graduated on March 14, 2014; **and**, denied the program's request to admit an evening class of 30 students commencing on June 9, 2014' graduating August 24, 2015, to **replace** students that graduated on March 14, 2014; **and**, approved the program's admission of 20 students commencing on June 9, 2014; graduating August 24, 2014, to **replace** students that graduated on March 14, 2014, provided that the program has no more than ten (10) students per instructor during clinical experience; **and**, denied the program a day class of 30 students commencing on September 1, 2014; graduating November 16, 2015, to **replace** students scheduled to graduate August 29, 2014; and, approved the program's admission of 20 students commencing September 1, 2014, graduating November 16, 2015, to **replace** students scheduled to graduate August 29, 2014, provided that the program has no more than ten (10) students per instructor during clinical experience; and, continued to require the program to obtain approval of the full Board prior to the admission of additional students.
- On June 9 – 10, Board representatives conducted an unannounced onsite survey of the program. Eight (8) violations of the California Code of Regulations were identified.
- On June 17, 2014, a Notice of Violations was sent to the assistant director. A plan of correction is due to the Board by July 11, 2014; **and**, the assistant director was notified that the program would be placed on the September 2014 Board agenda. The assistant director was required to complete the forms related to class admissions and submit to the NEC by June 23, 2014.

- On July 9, 2014, the assistant director submitted a plan to correct violations identified in the notice sent on June 17, 2014.
- **On September 10, 2014, a new director was approved by the Board.**
- On September 12, 2014, the Board approved Premiere Career College's request to admit a class of 30 evening students on December 8, 2014; that will graduate February 26, 2016 to **replace** students that graduated on June 6, 2014; **and, denied** the program's request to admit a class of 30 evening students on March 16, 2015; that will graduate May 20, 2016 to **replace** students that are scheduled to graduate on December 5, 2014; and, **denied** the program's request to admit a class of 30 day students on June 8, 2015; that will graduate August 12, 2016; **and, denied** the program's request to admit a class of 30 day students on August 31, 2015; that will graduate November 4, 2016 to **replace** students that are scheduled to graduate on August 24, 2015; **and, denied** the program's request to admit a class of 30 evening students on November 9, 2015; that will graduate January 27, 2017 to **replace** students that are scheduled to graduate on November 6, 2015; **and**, continue the program's terms of provisional approval as designated on February 28, 2014; and, the program shall continue to obtain approval of the full Board prior to the admission of additional students.
- On October 14, 2014, the Board received the director's comprehensive analysis as directed on February 28, 2014.
- On May 15, 2015, the Board approved Premiere Career College Vocational Nursing Program's request to admit an evening class of 30 students commencing on March 9, 2015, graduating May 13, 2016, to **replace** students that graduated on December 5, 2014; **and** approved the program's request to admit a day class of 30 students commencing on June 1, 2015, graduating August 5, 2016; **and** continued to require the program to obtain approval of the full Board prior to the admission of additional students.
- On September 9, 2015, the Board received electronic correspondence and materials from the director requesting reconsideration of provisional approval and approval to admit two (2) classes.
- On November 20, 2015, the Board **approved** Premiere Career College, Vocational Nursing Program for the four (4) year period from November 20, 2015 through November 19, 2019, and issued a certificate accordingly; **and, approved** Premiere Career College Vocational Nursing Program's request to admit an evening class of 30 students commencing on February 22, 2016, graduating April 28, 2017, **only**, to **replace** students that will graduate on February 19, 2015; **and, approve** the program's request to admit a day class of 30 students commencing on May 15, 2016, graduating July 21, 2017; **only**, to **replace** students that will graduate on May 13, 2016; **and**, continued to require the program to obtain Board approval prior to the admission of additional students.
- On May 19, 2016, the Executive Officer:



- 1- **Approved** Premiere Career College Vocational Nursing Program's request to admit an evening class of 30 students commencing on August 8, 2016, graduating October 31, 2017, **only**, to **replace** students that will graduate on August 5, 2016; and,
  - 2- **Approved** the request for a full-time day class of 30 students, commencing on October 31, 2016, scheduled to graduate on January 19, 2018, **only**, to replace the class graduating on October 28, 2016; and,
  - 3- **Denied** the request for a full-time evening class of 30 students, commencing on February 6, 2017, scheduled to graduate on April 13, 2018, to replace the class graduating on February 3, 2017; and,
  - 4- **Denied** the request for a full-time day class of 30 students, commencing on May 1, 2017, scheduled to graduate on July 6, 2018, to replace the class of students scheduled to graduate on April 28, 2017; and,
  - 5- **Denied** the program's request for ongoing admissions to replace graduating students only; and,
  - 6- **Continued** to require the program to obtain Board approval prior to the admission of additional students
- On December 13, 2016, the Executive Officer **approved** Premiere Career College Vocational Nursing Program's request to admit an evening class of 30 students commencing on February 3, 2017, graduating April 13, 2018, **only**, to replace students that will graduate on February 3, 2017, and; **approved** the request for a full-time day class of 30 students, commencing on May 1, 2017, scheduled to graduate on August 6, 2018, **only**, to replace the class graduating on April 28, 2016, and; **denied** the request for a full-time evening class of 30 students, commencing on July 24, 2017, scheduled to graduate on September 28, 2018, to replace the class graduating on July 21, 2017, and; **denied** the request for a full-time day class of 30 students, commencing on October 16, 2017, scheduled to graduate on December 21, 2018, to replace the class of students scheduled to graduate on October 19, 2017, and; **denied** the program's request for ongoing admissions to replace graduating students only, and; **continued** to require the program to obtain Board approval prior to the admission of additional students.
  - On May 19, 2017, the Executive Officer **approved** Premiere Career College Vocational Nursing Program's request to admit a full-time evening class of 30 students, commencing August 14, 2017, scheduled to graduate on October 19, 2018, to replace the class graduating on July 21, 2017, and; **approved** a full-time day class of 30 students, commencing on November 6, 2017, scheduled to graduate on January 25, 2019, to replace the class graduating on October 19, 2017, and; **denied** a full-time evening class of 30 students, commencing on February 12, 2018, scheduled to graduate on April 19, 2019, to replace the class graduating on January 19, 2018, and; **denied** a full-time day class of 30 students, commencing on May 7, 2018, scheduled to graduate on July 12, 2019, to replace the class graduating on April 13, 2018, and; **denied** the request for ongoing admissions of thirty (30) students four (4) times a year to replace graduating classes only, and; **continued** to require the program to obtain Board approval prior to the admission of additional students.

- On June 1, 2017, a new program director was approved.
- On December 5, 2017, the Executive Officer **approved** Premiere Career College Vocational Nursing Program's request to admit one (1) full-time evening class of 30 students commencing on January 29, 2018, graduating on April 5, 2019, to replace the class that will graduate on January 19, 2018, **and**; continued to require the program to obtain Board approval prior to the admission of additional students, **and**; continued to require the program, when requesting approval to admit students, to: (a) Submit all documentation in final form, using the forms provided by the Board, no later than two (2) months prior to the requested start date for the class, (b) Provide documentation that adequate resources, i.e. faculty and facilities, are available to support each admitted class of students, (c) Ensure that the program maintains an average annual pass rate that is compliant with Section 2530 (l) of the Vocational Nursing Rules and Regulations, **and**; continued to require the program to comply with all approval standards in Article 4 of the Vocational Nursing Practice Act, commencing at Business and Professions Code Section 2880, and Article 5 of the Board's Regulations, commencing at California Code of Regulations, Title 16, Section 2526.
- On February 6, 2018, the Executive Officer **approved** Premiere Career College Vocational Nursing Program's request to admit one (1) full-time day class of 30 students commencing on April 23, 2018, graduating on June 28, 2019, to replace the class that will graduate on April 13, 2018; **and**, continued to require the program to obtain Board approval prior to the admission of additional students; **and**, continued to require the program, when requesting approval to admit students, to: (a) Submit all documentation in final form, using the forms provided by the Board, no later than two (2) months prior to the requested start date for the class.(b)Provide documentation that adequate resources, i.e. faculty and facilities, are available to support each admitted class of students.(c) Ensure that the program maintains an average annual pass rate that is compliant with Section 2530 (l) of the Vocational Nursing Rules and Regulations Code; **and**, continued to require the program to comply with all approval standards in Article 4 of the Vocational Nursing Practice Act, commencing at Business and Professions Code Section 2880, and Article 5 of the Board's Regulations, commencing at California Code of Regulations, Title 16, Section 2526.
- On May 11, 2018, the Executive Officer approved Premiere Career College Vocational Nursing Program's request to admit one full-time evening class of 30 students, commencing on July 16, 2018, graduating on September 20, 2019, to replace the class that will graduate on July 6, 2018; **and**, approved Premiere Career College Vocational Nursing Program's request to admit one full-time day class of 30 students, commencing on October 8, 2018, graduating on December 13, 2019, to replace the class that will graduate on October 5, 2018; **and**, continued to require the program to obtain Board approval prior to the admission of additional students; **and**, continued to require the program, when requesting approval to admit students, to: (a) Submit all documentation in final form, using the forms provided by the Board, no later than two months prior to the requested start date for the class. (b) Provide documentation that adequate resources, i.e. faculty and facilities, are available to support each admitted class of students. (c) Require that the program maintains an average annual pass rate that is compliant with Section 2530(l) of the Vocational Nursing Rules and

Regulations; **and**, continued to require the program to comply with all approval standards in Article 4 of the Vocational Nursing Practice Act, commencing at Business and Professions Code Section 2880, and Article 5 of the California Code of Regulations, Title 16, Section 2526.

- On September 4, 2018, the Executive Officer approved Premiere Career College Vocational Nursing Program's request to admit a full-time evening class of 30 students, commencing on January 14, 2019, graduating on March 20, 2020, to replace the class that will graduate on January 11, 2019; **and**, continued to require the program to obtain Board approval prior to the admission of additional students; **and**, continued to require the program, when requesting approval to admit students, to: (a) Submit all documentation in final form, using the forms provided by the Board, no later than two months prior to the requested start date for the class. (b) Provide documentation that adequate resources, i.e. faculty and facilities, are available to support each admitted class of students. (c) Require that the program maintains an average annual pass rate that is compliant with Section 2530(l) of the Vocational Nursing Rules and Regulations; **and**, continued to require the program to comply with all approval standards in Article 4 of the Vocational Nursing Practice Act, commencing at Business and Professions Code Section 2880, and Article 5 of the California Code of Regulations, Title 16, Section 2526.
- On December 18, 2018, the Executive Officer approved Premiere Career College Vocational Nursing Program's request to admit a full-time day class of 30 students, commencing on April 8, 2019, graduating on June 12, 2020, to replace the class that will graduate on April 5, 2019; **and**, continued to require the program to obtain Board approval prior to the admission of additional students; **and**, continued to require the program, when requesting approval to admit students, to: (a) Submit all documentation in final form, using the forms provided by the Board, no later than two months prior to the requested start date for the class. (b) Provide documentation that adequate resources, i.e. faculty and facilities, are available to support each admitted class of students. (c) Require that the program maintains an average annual pass rate that is compliant with Section 2530(l) of the Vocational Nursing Rules and Regulations; **and**, continued to require the program to comply with all approval standards in Article 4 of the Vocational Nursing Practice Act, commencing at Business and Professions Code Section 2880, and Article 5 of the California Code of Regulations, Title 16, Section 2526.
- On April 2, 2019, the Executive Officer approved the Premiere Career College Vocational Nursing Program's request for ongoing admissions of two full-time day classes of 30 students per calendar year, replacing graduating classes only, and two full-time evening classes of 30 students per calendar year, replacing graduating classes only; **and**, approved ongoing admissions to replace graduating classes only, with the following stipulations: (a) No additional classes are added to the program's pattern of admissions without prior Board approval. The program's pattern of admissions will include admission of two full-time day classes of 30 students per calendar year, replacing graduating classes only, and two full-time evening classes of 30 students per calendar year, replacing graduating classes only. (b) The director documents that adequate resources, i.e. faculty and facilities, are available to support

each admitted class of students.(c) Ensure that the program maintains an average annual pass rate that is compliant with Section 2530(l) of the Vocational Nursing Rules and Regulations; **and**, continued to require the program to comply with all approval standards in Article 4 of the Vocational Nursing Practice Act, commencing at Business and Professions Code Section 2880, and Article 5 of the California Code of Regulations, Title 16, Section 2526.

- On May 21, 2019, the Executive officer revoked ongoing admissions for the Premiere Career College Vocational Nursing Program, effective immediately; **and**, required the program to admit no additional classes without prior approval by the Board; **and**, required the program, when requesting approval to admit students, to: (a) Submit all documentation in final form, using the forms provided by the Board, no later than two months prior to the requested start date for the class. (b) Provide documentation that adequate resources, i.e. faculty and facilities, are available to support each admitted class of students. (c) Ensure that the program maintains an average annual pass rate that is compliant with Section 2530(l) of the Vocational Nursing Rules and Regulations; **and**, required the program to comply with all approval standards in Article 4 of the Vocational Nursing Practice Act, commencing at Business and Professionals Code, section 2880, and Article 5 of the Board's Regulations, commencing at California Code of Regulations, Title 16, section 2526.
- On June 4, 2019, the Executive officer approved the Premiere Career College Vocational Nursing Program to admit a full-time evening class of 30 students commencing on July 1, 2019, and graduating on September 4, 2020, to replace the class that graduates on June 28, 2019; and continue the program's requirement to obtain Board approval prior to admission of any additional classes; Continue to require the program, when requesting approval to admit students, to: (a) Submit all documentation in final form, using the forms provided by the Board, no later than two months prior to the requested start date for the class. (b) Provide documentation that adequate resources, i.e. faculty and facilities, are available to support each admitted class of students. (c) Ensure that the program maintains an average annual pass rate that is compliant with Section 2530(l) of the Vocational Nursing Rules and Regulations. Require the program to submit a list of student names who are enrolled in Term 1 at the start of each cohort. Require the program to comply with all approval standards in Article 4 of the Vocational Nursing Practice Act, commencing at Business and Professionals Code, section 2880, and Article 5 of the Board's Regulations, commencing at California Code of Regulations, Title 16, section 2526.
- On August 6, 2019, the Executive officer Approve Premiere Career College Vocational Nursing Program's request to admit a full-time day class of 30 students commencing on September 23, 2019, and graduating November 27, 2020, to replace the class which will be graduating September 20, 2019.
  1. Continue to require the program to obtain Board approval prior to the admission of additional students.
  2. Continue to require the program, when requesting approval to admit students, to:
    - a. Submit all documentation in final form, using the forms provided by the Board, no later than two months prior to the requested start date for the class.

- b. Provide documentation that adequate resources, i.e., faculty and facilities, are available to support each admitted class of students.
  - c. Require that the program maintains an average annual pass rate that is compliant with Section 2530(l) of the Vocational Nursing Rules and Regulations.
- 3. Continue to require the program to comply with all approval standards in Article 4 of the Vocational Nursing Practice Act, commencing at Business and Professions Code Section 2880, and Article 5 of the California Code of Regulations, Title 16, Section 2526.
- On December 20, 2019 the Executive Officer approved the following:
  1. Deny continued full approval for the Premiere Career College, Vocational Nursing Program and place the program Premiere Career College Vocational Nursing Program on the January 27, 2020 Board Education Committee agenda for consideration of provisional approval.
  2. Deny the program director's request to admit a full-time evening class of 30 students commencing on January 6, 2020, and graduating March 12, 2021, to replace the class which graduated December 13, 2019.
  3. Require the program director to submit accurate term 4 faculty/student assignments for each student in the December 2019 graduating class, including plan to make up clinical hours with documented approval from the clinical sites.
  4. Require the program director to submit all clinical sign-in rosters for the December 2019 graduating class each week until all clinical hours have been made up. Clinical sign-in rosters are to be submitted on Friday of each week.
  5. Require the program director to submit documentation that the December 19, 2019 graduating class completed all required clinical make up hours by January 22, 2019.
  6. Require the program director to submit a plan to obtain adequate maternal newborn and pediatric clinical sites by December 20, 2019.
  7. Require the program director to submit a comprehensive analysis by January 20, 2020. The report must include a comprehensive analysis of the program, specific actions taken to improve program pass rates, timeline for implementation, and the effect of employed interventions, along with documentation of adequate maternal newborn and pediatric clinical sites. The following elements must be addressed in the analysis.
    - a. Admission Criteria
    - b. Screening and Selection Criteria
    - c. Theory and Clinical Objectives for Each Course
    - d. Current Evaluations of Theory and Clinical Faculty
    - e. Current Evaluations of Clinical Facilities
    - f. Current Evaluations of Clinical Rotations and Their Correlation to Theory Presentations

- g. Evaluation of Student Achievement
  - h. Current Enrollment
  - i. Plan to provide adequate and accurate clinical experiences to assure students are meeting the required Board approved clinical hours
8. Continue to require the program to obtain Board approval prior to the admission of additional students.
  9. Continue to require the program, when requesting approval to admit students, to:
    - a. Submit all documentation in final form, using the forms provided by the Board, no later than two months prior to the requested start date for the class.
    - b. Provide documentation demonstrating adequate resources, i.e. faculty and facilities, are available to support each admitted class of students.
    - c. Ensure that the program maintains an average annual pass rate that is compliant with Section 2530(I) of the Vocational Nursing Rules and Regulations.
  10. Require the program to comply with all approval standards in Article 4 of the Vocational Nursing Practice Act, commencing at Business and Professionals Code, section 2880, and Article 5 of the Board's Regulations, commencing at California Code of Regulations, Title 16, section 2526.
- On December 23, 2019, a new director was approved by the Board.
  - On February 20, 2020 the full Board approved the following
    1. Deny continued full approval for the Premiere Career College, Vocational Nursing Program and place program on provisional approval for a two-year period beginning February 21, 2020; and issue a notice to the program to identify specific area of non-compliance and requirements for correction as referenced in Section 2526.1(e) of the California Code of Regulations as referenced above.
    2. Require the program director to submit all clinical sign-in rosters for the December 2019 graduating class each week until all clinical hours have been made up. Clinical sign-in rosters are to be submitted on Friday of each week.
    3. Require the program director to submit documentation demonstrating that the December 2019 graduating class completed all required clinical make up hours by January 22, 2019.
    4. Require the program to submit a report to the Board in six months, no later than August 21, 2020, and in 18 months, no

later than September 21, 2021. The report must include a comprehensive analysis of the program, timeline for implementation, and the effect of employed interventions. The elements below must be addressed in the analysis.

- a. Terminal objectives
  - b. Evaluation of current curriculum including:
    - Instructional plan
    - Theory objectives for each term
    - Clinical objectives for each term
    - Lesson plans for each term
  - c. Student Policies including:
    - Admission policy
    - Screening and selection policy
    - Attendance policy
    - Remediation policy
    - Evaluation of student achievement
    - Credit granting policy
  - d. Evaluations of approved clinical facilities which determine adequacy in number and variety of patients to accommodate current and projected students.
  - e. Evaluations of faculty
  - f. Methodologies for:
    - 1- Faculty meetings
    - 2- Clinical evaluations
  - g. Documentation of required clinical resources for all terms for all current cohorts.
5. Require the program to provide no less than one instructor for every ten students in clinical experiences.
  6. Continue to require the program to obtain Board approval prior to the admission of additional students.
  7. Continue to require the program, when requesting approval to admit students, to:
    - b. Submit all documentation in final form, using the forms provided by the Board, no later than two months prior to the requested start date for the class.
    - c. Provide documentation demonstrating adequate resources, i.e. faculty and facilities, are available to support each admitted class of students.
    - d. Ensure that the program maintains an average annual pass rate that is compliant with Section 2530(l) of the Vocational Nursing Rules and Regulations.

8. Require the program to comply with all approval standards in Article 4 of the Vocational Nursing Practice Act, commencing at Business and Professionals Code, section 2880, and Article 5 of the Board's Regulations, commencing at California Code of Regulations, Title 16, section 2526.
  9. Failure to take any of these corrective actions may cause the full Board to revoke the program's approval.
- On February 27, 2020, a new director was approved by the Board.
  - On May 22, 2020 the full Board approved the following
1. Deny the Premiere Career College Nursing Program's request to admit a full-time class of 30 students commencing on June 1, 2020, graduating on August 21, 2021, to replace the February 7, 2020, graduating class.
  2. Require the program to submit a comprehensive analysis to the Board no later than August 21, 2020, and September 21, 2021. The report must include a comprehensive analysis of the program, timeline for implementation, and the effect of employed interventions. The elements below must be addressed in the analysis.
    - e. Terminal objectives
    - f. Evaluation of current curriculum including:
      1. Instructional plan
      2. Theory objectives for each term
      3. Clinical objectives for each term
      4. Lesson plans for each term
    - g. Student Policies including:
      - i. Admission policy
      - ii. Screening and selection policy
      - iii. Attendance policy
      - iv. Remediation policy
      - v. Evaluation of student achievement
      - vi. Credit granting policy
    - h. Evaluations of approved clinical facilities which determine adequacy in number and variety of patients to accommodate current and projected students.
    - e. Evaluations of faculty
    - f. Methodologies for:
      - 1- Faculty meetings
      - 2- Clinical evaluations
    - g. Plan to increase the number of students who pass the exit exam.
  3. Require the program to provide no less than one instructor for every ten students in clinical experiences.
  4. Continue to require the program to obtain Board approval prior to the admission of additional students.
  5. Continue to require the program, when requesting approval to admit students, to:



- d. Submit all documentation in final form, using the forms provided by the Board, no later than two months prior to the requested start date for the class.
  - e. Provide documentation demonstrating adequate resources, i.e. faculty and facilities, are available to support each admitted class of students.
  - f. Ensure that the program maintains an average annual pass rate that is compliant with Section 2530(l) of the Vocational Nursing Rules and Regulations.
6. Place the program on the February 2022 Board agenda for reconsideration of provisional approval.
  7. Require the program to comply with all approval standards in Article 4 of the Vocational Nursing Practice Act, commencing at Business and Professionals Code, section 2880, and Article 5 of the Board's Regulations, commencing at California Code of Regulations, Title 16, section 2526.
  8. Failure to take any of these corrective actions may cause the full Board to revoke the program's approval.

**From:** [olayugan@premierecollege.edu](mailto:olayugan@premierecollege.edu)  
**To:** ["vrollins@beverly.org"](mailto:vrollins@beverly.org)  
**Cc:** ["Magan Vergara"](#); ["Rowena Gabriel"](#)  
**Subject:** Availability of clinical site for VN student rotation  
**Date:** Friday, June 5, 2020 3:24:00 PM  
**Attachments:** [image001.gif](#)  
[image002.png](#)

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Hi Ms. Rollins,

Good afternoon. I hope this finds you well.

I am sending this email from Premiere Career College to check on the availability of your hospital for resumption of clinical rotation for our students. If and when the resumption of clinical rotations take effect, are there any requirements to be instituted by your organization that the school will have to implement with the students? Looking forward to any update from you.

Thank you and best regards.

*Ofelia F. Layugan, MSN-ED, RN*

*Program Director of Vocational Nursing*

*Premiere Career College*

12901 Ramona Boulevard

Irwindale, California 91706

[www.premierecollege.edu](http://www.premierecollege.edu)

*Tel. # 626.814.2080 ext. 2122*



**From:** [gbato](mailto:gbato@premierecollege.edu)  
**To:** [olayugan@premierecollege.edu](mailto:olayugan@premierecollege.edu); [mvergara@premierecollege.edu](mailto:mvergara@premierecollege.edu)  
**Subject:** FW: Premiere Career College-Follow-up VN students clinical rotations  
**Date:** Tuesday, June 9, 2020 10:56:25 AM

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**Gloria G. Bato, CST**

*Clinical Coordinator*

*Student Services*

[gbato@premierecollege.edu](mailto:gbato@premierecollege.edu)

*Premiere Career College*

*12901 Ramona Boulevard*

*Irwindale, California 91706*

[www.premierecollege.edu](http://www.premierecollege.edu)

*Phone: 626-814-2080 loc. 2129*

*Fax: 626-856-5766*

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**From:** Lily Zhang [mailto:lzhang@eehc.org]  
**Sent:** Tuesday, June 09, 2020 10:35 AM  
**To:** 'gbato'  
**Subject:** RE: Premiere Career College-Follow-up VN students clinical rotations

Good Morning Gloria:

Due to the COVID-19 pandemic, after a outbreak in our facility, we are unable to schedule any school for clinical rotation at this time, if we are reopen to schools, I will let you know.

Thank you!

Lily Zhang RN

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**From:** gbato <[gbato@premierecollege.edu](mailto:gbato@premierecollege.edu)>  
**Sent:** Thursday, June 4, 2020 11:49 AM  
**To:** Lily Zhang <[lzhang@eehc.org](mailto:lzhang@eehc.org)>  
**Subject:** Premiere Career College-Follow-up VN students clinical rotations

Dear Ms. Lily,

Hope everything is going well with you. This email is to follow-up the clinical rotation for Vocational Nursing and what are the things students need to follow in order to return to the clinicals. Your response is greatly appreciated.

Thank you,

**Gloria G. Bato, CST**

*Clinical Coordinator*

[gbato@premierecollege.edu](mailto:gbato@premierecollege.edu)

Premiere Career College

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**From:** [Rowena Gabriel](mailto:Rowena.Gabriel@premierecollege.edu)  
**To:** [olayugan@premierecollege.edu](mailto:olayugan@premierecollege.edu)  
**Subject:** FW: Dignity Health Educational Training Agreement  
**Date:** Thursday, June 11, 2020 11:03:19 AM  
**Attachments:** [image001.png](#)

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**From:** Sutherland, Candice - SAC [mailto:Candice.Sutherland@DignityHealth.org]  
**Sent:** Thursday, June 11, 2020 10:12 AM  
**To:** Rowena Gabriel <[rgabriel@premierecollege.edu](mailto:rgabriel@premierecollege.edu)>  
**Cc:** Sutherland, Candice - SAC <[Candice.Sutherland@DignityHealth.org](mailto:Candice.Sutherland@DignityHealth.org)>  
**Subject:** RE: Dignity Health Educational Training Agreement

Good Morning Rowena,

Thank you for your voicemail and this email. I will have an agreement created ASAP. Please advise as to when the start date for students being placed at our Dignity Health facilities will be.

**Respectfully,**

**Candice Sutherland**  
**Learning Center Coordinator**



***Collaborative Learning Center***

1700 Tribute Road, Suite 100  
Sacramento, California 95815  
916.733.6340 mCE office line  
916.733.6351 Fax  
[GSSA-DHMF-mCEHelp@dignityhealth.org](mailto:GSSA-DHMF-mCEHelp@dignityhealth.org)

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**From:** Rowena Gabriel [<mailto:rgabriel@premierecollege.edu>]  
**Sent:** Wednesday, June 10, 2020 4:51 PM  
**To:** Sutherland, Candice - SAC  
**Subject:** RE: Dignity Health Educational Training Agreement

**USE CAUTION - EXTERNAL EMAIL**

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Good Afternoon Ms. Sutherland,

Thank you for your e-mail today. This is to confirm that we have reviewed and accept the agreement as is.

Please find attached the Educational Program Profile (EPP) for our Vocational Nursing, Associate in Occupational Science – Surgical Technology and Hospital Central Service Technician Program. Thank you so much for your time and we truly consider this affiliation a privilege. Should you have any

questions, please feel free to give me a call at (626) 814-2080.

Sincerely,  
Premiere Career College

Rowena Gabriel, BS, M.Sc.  
Director of Career Development/  
Student and Employee Services  
[rgabriel@premierecollege.edu](mailto:rgabriel@premierecollege.edu)  
(626) 814-2080

---

**From:** Sutherland, Candice - SAC [<mailto:Candice.Sutherland@DignityHealth.org>]  
**Sent:** Wednesday, June 10, 2020 3:19 PM  
**To:** [RGabriel@premierecollege.edu](mailto:RGabriel@premierecollege.edu)  
**Cc:** Sutherland, Candice - SAC <[Candice.Sutherland@DignityHealth.org](mailto:Candice.Sutherland@DignityHealth.org)>  
**Subject:** RE: Dignity Health Educational Training Agreement

Good Afternoon Rowena,

Any update on if the agreement language and terms will be accepted?

**Respectfully,**

**Candice Sutherland**  
**Learning Center Coordinator**



***Collaborative Learning Center***

1700 Tribute Road, Suite 100  
Sacramento, California 95815  
916.733.6340 mCE office line  
916.733.6351 Fax  
[GSSA-DHMF-mCEHelp@dignityhealth.org](mailto:GSSA-DHMF-mCEHelp@dignityhealth.org)

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**From:** Sutherland, Candice - SAC  
**Sent:** Tuesday, May 26, 2020 3:28 PM  
**To:** [RGabriel@premierecollege.edu](mailto:RGabriel@premierecollege.edu)  
**Cc:** Sutherland, Candice - SAC  
**Subject:** Dignity Health Educational Training Agreement

Good afternoon Rowena,

I was forwarded your email stating that there was an interest in establishing a master educational training agreement between Dignity Health and the Premier College.

For your review I have attached two documents above:

• The first is an Educational Program Profile (EPP). We ask that you complete this form for each program that you are interested in sending students from and return it to me by email. **Please pay particular attention to completing the information in the top right corner (FEIN & Entity #'s are required) as our Legal Department needs that information to draw up the agreement.** (FEIN is the tax ID number & the Entity number can be found on the Secretary of State's website)

**\*\*\*Please note that if the Entity number or FEIN are left off the form it will be considered incomplete and will stall the process until completed.**

I will review your program particulars and accreditation status (institutional and programmatic), and if everything is in order we can proceed.

• The second is a GENERIC, **review-only (please do not sign)** copy of the Master Agreement template we require at Dignity Health. This document was the product of many months of work by our Legal & Education departments, and is now the required standard for all colleges & schools sending students to us for educational rotations. As such, our Legal Department is not entertaining requests for changes to the language of the agreement. Rather, it is "offered" to institutions that are willing to accept and abide by the terms it contains.

o I would ask that you have your Legal team review the agreement and **confirm in writing** that they can accept it without changes. If so, then we will have cleared both hurdles and can proceed to drawing up the formal agreement for execution.

So the next steps would be for you to **return the EPP to me electronically**, and also **provide me an email confirming that your school can accept the terms of the agreement**. At that point, I'll get the contract started.

Thank you kindly.

**Respectfully,**

**Candice Sutherland**  
**Learning Center Coordinator**



***Collaborative Learning Center***

1700 Tribute Road, Suite 100

Sacramento, California 95815

916.733.6340 mCE office line

916.733.6351 Fax

[GSSA-DHMF-mCEHelp@dignityhealth.org](mailto:GSSA-DHMF-mCEHelp@dignityhealth.org)

**From:** [mvergara@premierecollege.edu](mailto:mvergara@premierecollege.edu)  
**To:** [olayugan@premierecollege.edu](mailto:olayugan@premierecollege.edu)  
**Cc:** [Rowena Gabriel](#)  
**Subject:** FW: ppe  
**Date:** Wednesday, May 13, 2020 11:27:44 AM  
**Attachments:** [Outlook-1466608314.png](#)  
[Covid Education 4-8-20.pdf](#)  
[Masking for Workforce Members Excluding N95 Respirators v2 4-7-20.pdf](#)  
[PPE EP for COVID-19.pdf](#)

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Hi Ms. Ofelia,

Please find the email below from Dr. Ruby Gabbedon at LAC-USC.

Thank you.

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**From:** Ruby Griggs-Gabbedon [mailto:rgriggs@dhs.lacounty.gov]  
**Sent:** Wednesday, May 13, 2020 11:24 AM  
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**Subject:** ppe

Good Morning,

In compliance with the Governors mandate to continue to social distance until July 15, 2020, I would like to take this time to remind everyone of the educational requirements that will remain in place as you rotate through LAC+USC Medical Center for clinical. As we remain on the frontline during this unprecedented time, all schools will maintain its responsibility to provide your students with **Surgical Mask** to enter into the patient care setting. It is also our expectation that you will continue the following:

- Complete a self assessment to include the following
  - Asking if the student has a cough
  - Asking if the student has a soar throat
  - Asking if the student has a fever
  - Asking if the student has been in contact with someone who is COVID + or



traveled to a COVID hotspot in the past 14 days

- Asking if the student is taking any antipyretics or cough suppressants in the past 72 hours
- Make sure the student does not take any isolated patients
- Refrain from assigning students isolated patients
- Review with the students the attached policies

Thanks in advance for your compliance with these actions that have been established to keep the patients and the students safe. I will continue to keep you all posted regarding the events surrounding this pandemic here at LAC+USC.

Respectfully,

*Ruby Gabbedon*

Ruby Gabbedon DNP, CNML, RN  
Director, Educational Resource Center  
Senior Nursing Instructor  
Coordinator, Affiliate Schools

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# COVID-19 NURSING EDUCATION

4/8/20

## 1. Transmission

- Transmission most commonly occurs from person-to-person via respiratory droplets among close contacts
- Close contact means being within approximately 6 feet of a person with COVID-19
- Having direct contact with infectious secretions from a person with COVID-19. Infectious secretions may include sputum, serum, blood, and respiratory droplets
- Via fomites, i.e. inanimate objects such as clothes, furniture, keyboards

## 2. Symptoms

- Symptoms of COVID-19 include fever, cough, shortness of breath
- COVID-19 is transmitted by droplets, like influenza

## 3. Self-screening

- If you are not feeling well, stay home
- Symptoms of COVID-19 are similar to influenza:
  - Fever
  - Coughing
  - Shortness of breath
- Contact provider if you experience any of the following symptoms:
  - Difficulty breathing or shortness of breath
  - Pain or pressure in the chest or abdomen
  - Sudden dizziness
  - Vomiting and diarrhea
  - Fever and/or chills
  - Disorientation or confusion

## 4. Prevention

- Key to preventing COVID-19 transmission:
  - Handwashing for at least 20 seconds
  - Placing symptomatic suspected COVID-19 patients into isolation
  - PPE
  - Avoiding touching your face after patient contact
  - Minimizing number of staff entering patient room
  - Cleaning of surfaces
  - Ensuring the number of air exchanges in the hospital exceed the number required
  - Keeping a log sheet of all persons entering the room (see log sheet slide)
  - Having a colleague review donned PPE
  - Ensuring there are no visitors

- Using disposable equipment as much as possible
- Wearing PPE for COVID-19 positive and PUI (persons under investigation), which includes surgical masks, face shield, gown, and gloves. N95 masks are used for aerosol-generated procedures and ICU patients.
- Continuing to wear PPE in the room of a discharged patient until cleaning and disinfection has been completed (see N95 Respirators slide for exception)

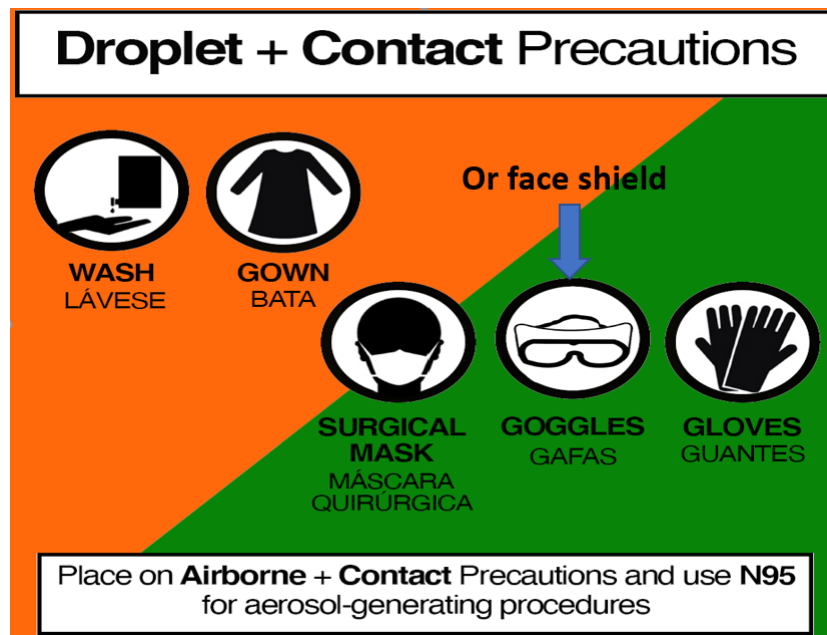
#### 5. Surgical Mask

- Employees at their own discretion, are permitted to wear a surgical mask in any clinical area of a hospital or clinic, at any time
- This is NOT mandatory. Staff members may choose not to don a mask unless PPE is an expected practice
- A surgical mask may be used for an entire shift and between patients, unless the patient is in contact precautions; then the mask must be discarded upon leaving that patient's room
- All staff are always required to continue proper hand hygiene
- Employees should continue following other appropriate PPE guidelines as identified in policies and procedures
- Employee should NOT pull down the mask onto their chin or above their eyes. It should be removed if not being worn properly
- Employee should NOT bring any mask from outside the hospital. This includes cloth or homemade as well as store-bought masks. They may not afford the same level of protection as DHS surgical masks

#### 6. N95 Respirators

- Employees should don a N95 while providing care for any patient in airborne precautions (including PUI and COVID-19 positive patients) if:
  - An aerosol-generating procedure will be performed or
  - They are in the ICU
- In addition, if any fit-tested healthcare worker feels that it is essential for them to wear an N95 while caring for a PUI or COVID-19 positive patient, they may do so, subject to continued availability
- Must have a tight seal around mouth and nose. There should be no gaps
- Men with facial hair should use a PAPR if hair interferes with N95 fit
- Replace N95 if it becomes soiled or no longer holds a tight seal
- Continue to wear N95 mask for 1 hour after transfer when entering the room of a patient who received an aerosol-generated procedure

## 7. Revised isolation sign



## 8. Hand Hygiene

- When to perform hand hygiene
  - Before going into a patient care room, even if there is no patient inside
  - When entering and exiting the patient room
  - Before donning or doffing reusable N95 mask or face shield/goggles
  - Wash hands with soap and water when they are visibly dirty
  - After using the restroom
  - Before putting on gloves and after removing gloves
  - In an emergency situation, perform hand hygiene as soon as safely possible
  - Wash with soap and water after every 5-10 applications of alcohol-based sanitizers
- Technique
  - Wash hands with soap and water when they are visibly dirty
  - Rub hands together until dry after applying alcohol-based hand rub
  - When washing hands with soap and water, rub hands together vigorously for at least 20 seconds
  - Direct patient care staff health care workers who have contact with patients, patient supplies, equipment and food cannot wear artificial fingernails and long natural fingernails

## 9. PPE

- Donning PPE Sequence

- Hand hygiene
- Gown
- Mask
- Goggles or face shield
- Gloves
- Doffing PPE Sequence (if not reusing face shield)
  - Grasp the gown in the front and pull away from your body so that the ties break, touching outside of gown only with gloved hands
  - While removing the gown, fold or roll the gown inside out in a bundle
  - As you are removing the gown, peel off your gloves at the same time, only touching the inside of the gloves and gown with your bare hands
  - Remove goggles or face shield
  - Remove mask
  - Perform hand hygiene

#### 10. Face shields (FS) and goggles (G)

- FS/G can be reused by the SAME staff person until they are non-functional/damaged/limited or visibility is impaired
- FS/G should be topically disinfected with a Sani-cloth wipe (purple top) after each patient encounter (see next slide for procedure)
- Disinfection is mandatory after contact with a PUI or known COVID-19 (+) patient. It is not mandatory after contact with a PUI patient at very low risk of being COVID-19 positive as determined by the clinician
- In all instances, if a gross splash or contamination occurs, the FS/G must be discarded as per Standard Precautions
- FS/G are NEVER to be taken home
- After disinfection at end of shift, FS/G should be placed in a secure area
- FS/G can be used for as long as staff believe it is still functional and intact
- FS/G disinfection procedure
  - While in the room, doff gloves
  - Doff FS/G and put on tray or next to sink for later disinfection
  - Doff gown and perform hand hygiene
  - Don clean pair of gloves (in preparation to disinfect FS/G)
  - Thoroughly wipe down FS/G with a Sani-cloth wipe (purple top)
  - Doff gloves and allow FS/GF to slip onto forearm via the strap
  - Perform hand hygiene and leave room
  - Doff mask
  - Rinse FS/G with tap water/wet paper towel to eliminate remaining residue  
(This is not a disinfection step, but done to maintain the integrity of the equipment and prolong its useable life)

#### 11. Transporting of patients

- Preparing patient for transfer:

- Notify receiving area that COVID-19 patient or PUI is coming and PPE will be required
- Wear all recommended PPE while in the room
- Place surgical mask on the patient and cover with clean gown and bed sheet not stored in patient room
- Cover any patient wounds
- Have patient wash hands before leaving, if possible
- Once patient is on gurney or wheelchair and prior to leaving room, staff should remove their gown, gloves, eye protection, and then perform hand hygiene. Mask will remain on
- Wipe down wheelchair or gurney with Sani-cloth (purple top) prior to using
- Transporting patient:
  - Staff must continue to wear mask
  - Additional new PPE may be worn if there is an anticipated need to provide medical assistance during transport
  - If possible, send “clean” transporting staff to open door or push elevator button
- Arriving at destination:
  - If assistance needed to get patient out of wheelchair or gurney, staff should re-don all recommended PPE
  - Wipe down wheelchair with Sani-cloth if available or upon returning to the unit
  - Dispose of PPE in regular trash container

## 12. Emergencies-COVID patients

- For all patients, the primary nurse should assess patient’s risk for COVID-19 and work with the charge nurse to ensure that this information is communicated at the entry to the patient’s room
- Upon calling a Code, the unit charge nurse or designee should ensure PPE is available at the door of the patient’s room
- Only the minimum number of personnel necessary should enter the room to provide care
- Make every attempt to keep the crash cart outside the patient’s room and have a “clean person” outside the room who can pull supplies and medications from the cart.
- Before entering the room, all staff should assess whether PPE requirements are posted on the door
- Rapid response transportation
  - Place mask on the patient and cover with clean gown
  - If patient is intubated, ensure patient’s BVM is equipped with a Thermaflo filter (these filters are on the crash cart)
  - Doff PPE at exit of patient’s room so as not to track/spread infectious particles throughout hospital during transport to higher level of care (e.g., en route to ICU)
  - If supply and clinical circumstances allow, if transporting a high-risk patient from the ward/tele/PCU to higher level of care, after doffing PPE in original room, place

new PPE on transporting team before transport if there is an anticipated need to provide medical assistance during transport (e.g. bagging an intubated patient)

- Minimize number of staff required for transport, e.g., no more than three – an RT, RN (preferably ICU RN attending code) and Code MD
- During transport, one “clean” staff member should refrain from touching the patient or contaminated surfaces in order to be available to interact with necessary uncontaminated surfaces – e.g., elevator buttons, doors, etc

**13. Medications handling for PUI or COVID-19:**

- When handling medications brought from home:
  - Utilize PPE while handling medications
  - Seal in the tamper-proof security bag and, away from the patient, wipe the outer bag with Sani-cloth (purple top) before taking to pharmacy
- Discard medications that are left in the patient’s room, such as inhalers, in the pharmaceutical bin; do not return to pharmacy
- If the crash cart goes into the patient’s room, bag the medication tray and all unused medications and return to D & T pharmacy. Do not take the used tray to the satellite pharmacies or give to the techs delivering medications.

14. Log sheet

**LAC+USC Medical Center**  
**Log of Individuals Entering Rooms Housing Patients with Suspect/Confirmed**  
**COVID-19**



<b>Room Number:</b>	<b>Patient Name:</b>	<b>MRN:</b>			
<b>Date:</b>					
Employee Name	Category (MD,RN,etc.)	Time-in	Time-out	Buddy's Name/ Title	Comments

15. Discharge of COVID patients

- Receive the discharge order
- Have patient get dressed (change into own clothes)

- Make sure someone has obtained the patient's home medications before the patient leaves the floor
- Make sure the patient's ride is downstairs before leaving the floor
- Once the patient is ready to go downstairs, give the patient a fresh surgical mask
- The RN discharging should don a fresh mask as well (the RN does not need goggles or yellow gown at this point)
- Have patient come out of the room
- Give patient the discharge instructions in the anteroom or other clean area (LAC+USC COVID-19 Home Care instructions)
- Give the patient 2-3 surgical face masks
- RN/staff should use a wheelchair (wiped down with Sani-cloth (purple top wipe) to transport the patient to the car
- Once in the elevator, do not allow other people to enter the elevator with you and the patient
- Take patient directly to vehicle waiting to escort patient home
- If a wheelchair is used, again clean the wheelchair with a Sani-cloth (purple top wipe), along with pen used and perform hand hygiene
- Discharge instructions include:
  - Self-quarantine
  - Seeking Medical Care for
    - ❖ Difficulty breathing
    - ❖ Inability to keep fluids down
    - ❖ Dehydration
    - ❖ Confusion
    - ❖ Other serious symptoms
  - Life-threatening symptoms, call 911

#### 16. Postmortem care

- Wear gown, mask, face shield or goggles and gloves for postmortem care
- Place a facemask on the deceased when lifting and moving the body, because of the possibility that air may be expelled from the body
- Wear gloves when handling the body bag
- Disinfect the outside of the bag with Sani-cloth (purple top) after patient is placed in the bag

#### 17. COVID resources

- Virtual Town Halls
- Epidemiology Department x96645
- Nurse Manager
- LAC+USC Intranet home page -DHS and LAC Corona sites with updated links
- CDC, WHO site
- EDCOS Department



Initial:

3/25/20

Revisions:

3/26/20, 4/1/20, 4/8/20



## Masking for Workforce Members (Excluding N95 Respirator)

**Date: 4-7-20**

**Purpose:**

To update guidance for providers on when and where to wear surgical masks at this time given the changing guidance by CDC and others. The N95 Respirator Policy remains unchanged.

**Reasoning:**

This update allows for the use of non-medical masks for workforce members **not performing patient care**. In addition, this update provides more guidance for workforce members providing patient care and use of surgical masks during close contact with patients or other workforce members.

**Procedure:**

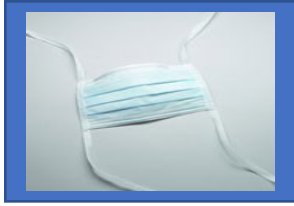
To increase protection for staff and patients, the DHS Infection Prevention & Control (IPC) group in conjunction with the COVID-19 Oversight Committee recommend the following:

**Workforce members with face-to-face patient contact**

- Workforce members with patient contact include clinical workforce that provide direct clinical care and non-clinical workforce members (e.g. registration, PFS, EVS, clerical)
- Workforce members with patient contact at their own discretion, are recommended to wear a surgical mask in any clinical area of a hospital or clinic, at any time.
  - Masks should be worn for no longer than one shift and should be discarded at end of shift.
- Workforce members with patient contact, when they are in face to face interactions with a patient or another HCW and are unable to maintain social distancing (>6 feet from others), the workforce member **should** wear a surgical mask, unless the clinical situation (e.g. aerosol generating procedure such as bronchoscopy, intubation, etc.) requires alternative protection (e.g., N95 or PAPR/CAPR).
  - Masks should be worn no longer than one shift and should be discarded at end of shift.

**Workforce members without face-to-face patient contact**

- Workforce members who are not performing patient care and are not in a patient care area (e.g. staff working in a call center, HR, Administration, etc.), while on campus, are permitted to use non-medical masks (e.g., made of cloth, “homemade,” self-purchased or privately-owned masks).
- Workforce members are asked to maintain social distancing (>6 feet from others) on a regular/consistent basis as is feasible within the constraints of the workplace. Cloth **DHS teams are reassessing things daily, and we appreciate your understanding as we continue to adapt to the ongoing challenges during the COVID-19 outbreak.**



## Masking for Workforce Members (Excluding N95 Respirator)

mask should be of a design to cover the mouth and nose adequately. In addition, any printed fabrics used for the mask should use a design that promotes a safe and friendly work environment.

- Facilities are encouraged to make available any donated cloth masks to their staff as available.

DHS teams are reassessing things daily, and we appreciate your understanding as we continue to adapt to the ongoing challenges during the COVID-19 outbreak.

- If using a cloth mask, workforce members should ensure the mask is cleaned/launched regularly.
- For further information on non-medical masks please see:  
<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Face-Coverings-Guidance.aspx>

### **Employees should continue to:**

- Remove surgical mask and discard upon leaving a patient room that is identified as Contact Precaution (i.e., all PUI and known COVID-19 positive patients).
- Continue following other appropriate PPE as identified in policies and procedures.

**DHS teams are reassessing things daily, and we appreciate your understanding as we continue to adapt to the ongoing challenges during the COVID-19 outbreak.**

## **PPE Expected Practice During the COVID-19 Pandemic**

**Date: April 16, 2020**

### **Purpose:**

To provide health care workers (HCW) with appropriate protections to avoid exposure to SARS-CoV-2 by using gowns, gloves, face shields or goggles, and appropriate respiratory protections during patient care activities.

### **Definition**

PUI – Person Under Investigation with symptoms of possible SARS-CoV-2 infection

SARS-CoV-2 – the virus causing COVID-19 disease

HCW- Healthcare Worker

### **Respiratory Precautions Procedure**

N95 Respirator use required with airborne precautions

N95 respirators are indicated based on procedures that aerosolize (AGP) which include patients that are PUIs or COVID-19 positive receiving the following procedures:

- Intubation procedures
- Bronchoscopy
- High-flow oxygen nasal canula (airflow delivered at 40-60LPM)
- BiPAP/CPAP
- Sputum Induction
- Nebulized treatment
- CPR

CAPR/PAPRs are also acceptable in place of N95 and face shields. There is no specific data that a CAPR/PAPR provides better protection.

In addition, N95 respirators are recommend for HCWs out of abundance of caution in some situations. The following table is not meant to be fully inclusive of non PUI/COVID-19 patients but does include common situations that may arise during the pandemic. If a situation is not listed, please consult your local Infection Prevention and Control policies for further guidance.

### **Employees must:**

- Continue proper hand hygiene, i.e., before and after entering the patient care environment.
- Continue to wear a DHS provided mask when performing their job duties in a clinical care area.

### **Employees will NOT:**

- Place a surgical mask over N95 respirator, as this may damage the mask or break the seal leading to increased risk for the HCW wearing N95

## PPE Expected Practice During the COVID-19 Pandemic

### Guidance for PPE for Workforce Members

Clinical Scenario	N95 (or equivalent) vs other	Risk for COVID-19 Exposure	Reuse or Extended Use	Other PPE
NP or OP sample collection for SARS-CoV-2 testing	Surgical mask	Low risk	No	Gown Gloves Face shield or goggles
NP Washes for SARS-CoV-2 testing (Not for routine testing and should only be done as part of specialized protocols) *Neg pressure room if available	N95	High to moderate risk	No	Gown Gloves Face shield or goggles
Aerosol Generating Procedures as detailed above in COVID-19 Positive patient or PUI *Neg pressure room when possible	N95	High risk	No	Gown Gloves Face shield or goggles
Patients requiring ICU care regardless of location – PUI/COVID positive	N95	Moderate risk	No	Gown Gloves Face shield or goggles
Patients requiring ICU care regardless of location – not PUI/COVID	N95 recommended	Moderate to Low Risk	Yes <sup>1</sup> , unless patient in contact isolation	As dictated by underlying conditions
Step-Down/Ward PUI/COVID positive	Surgical mask but N95 acceptable	Low Risk	No	Gown Gloves Face shield or goggles
Step-Down/Ward – not PUI/COVID	Surgical mask recommended	Low risk	Yes <sup>2</sup>	As dictated by underlying conditions

## PPE Expected Practice During the COVID-19 Pandemic

Clinical Scenario	N95 (or equivalent) vs other	Risk for COVID-19 Exposure	Reuse or Extended Use	Other PPE
HCW that cannot maintain social distancing from patient or other HCW in hospital or clinic setting but not direct patient care	Surgical mask recommended	Low risk	Yes <sup>2</sup>	As dictated by underlying conditions
Airborne Precautions for things other than PUI/COVID positive (Measles, TB, etc.)	N95	High risk	Yes <sup>1</sup>	As dictated by underlying conditions
Airway management teams and/or Rapid response teams – PUI/COVID positive *Neg pressure room when possible	N95	High risk	No	Gown Gloves Face shield or goggles
Intubations in OR/ED or elsewhere – PUI/COVID positive *Neg pressure room when possible	N95	High risk	No	Gown Gloves Face shield or goggles Surgical cap – in OR only
Intubations in OR/ED or elsewhere - not PUI/COVID Can use negative pressure room when feasible	N95 recommended	Moderate risk	Yes <sup>1</sup>	Gown Gloves Face shield or goggles Surgical cap – in OR only
Airway procedures (including endoscopies) or thoracic surgery	N95 recommended	Moderate to High risk	Yes <sup>1</sup> , unless PUI/COVID positive then discard	Gown Gloves Face shield or goggles Surgical cap – in OR only

## PPE Expected Practice During the COVID-19 Pandemic

Clinical Scenario	N95 (or equivalent) vs other	Risk for COVID-19 Exposure	Reuse or Extended Use	Other PPE
Nonclinical workforce member in clinical areas with direct patient interactions (e.g. registration, PFS, EVS, clerical) outside of above	Surgical mask recommended	Low risk	Yes <sup>2</sup>	As dictated by job duties in clinical areas
<b>IR procedures</b>				
IR Procedures that generate aerosols: lung biopsy, lung ablation, bronchial stenting, and bronchial artery embolization – regardless of PUI/COVID status	N95	High risk	Yes <sup>1</sup> , unless PUI/COVID positive or contact isolation then discard	Gown Gloves Face shield or goggles Surgical cap – if required by procedure
All other IR procedure – PUI/COVID positive	Surgical Mask	Low Risk	No	Gown Gloves Face shield or goggles Surgical cap – if required by procedure
All other IR procedure – not PUI/COVID negative	Surgical Mask	Low Risk	Yes <sup>2</sup>	PPE as per procedure
<b>Ambulatory Care Setting</b>				
Evaluation Outdoors - PUI/COVID positive	Surgical Mask	Low Risk	Yes <sup>2</sup>	Keep 6 feet away from patient
Evaluation in room - PUI/COVID positive	Surgical Mask	Low Risk	No	Gown Gloves Face shield or goggles Closed toed shoes

## PPE Expected Practice During the COVID-19 Pandemic

Clinical Scenario	N95 (or equivalent) vs other	Risk for COVID-19 Exposure	Reuse or Extended Use	Other PPE
Evaluation in room – not PUI/COVID	Surgical Mask	Low Risk	Yes <sup>2</sup>	None
<b>Special Situations</b>				
L&D triage if social distancing of 6 feet cannot be obtained (patient and visitors should also be masked when possible)	Surgical mask	Low risk	Yes <sup>2</sup>	None
L&D triage screen positive for fever and cough, or unexplained fever and direct patient contact with <6 feet	Surgical mask	Low risk	No	Gown Gloves Face shield or goggles
Vaginal Deliveries regardless of PUI/COVID status	Surgical Mask	Low Risk	No	Gown Gloves Face shield or goggles
C-sections given risk of possible intubation regardless of PUI/COVID status	N95	High risk or Low risk	Yes <sup>1</sup> , unless PUI/COVID positive or in contact isolation then discard	Gown Gloves Face shield or goggles Surgical cap
Quarantined unit of PUIs in Correctional Facility	Surgical Mask	Low risk	Yes <sup>3</sup>	Gown, Gloves Face shield or goggles if within 6 feet of PUI
<b>Other Workforce Members</b>				
Workforce members who are <b><u>not performing patient care</u></b> (e.g. staff working in a call center, HR, Administration, etc.)	Made of cloth, “homemade,” self-purchased or privately-owned masks	Low risk	Yes <sup>4</sup>	None

<sup>1</sup>Reuse of N95 respirator as per Policy

<sup>2</sup>May extend use for duration of shift if not soiled/damaged and patient not in contact isolation



## PPE Expected Practice During the COVID-19 Pandemic

<sup>3</sup>May use for duration of time in the unit, then discarded

<sup>4</sup>Launder regularly

### **N95 Respirator reuse policy**

- Continue the reuse policy as documented in [COVID-19 Respiratory Protections document<sup>2</sup>](#) as summarized here for non COVID-19 positive or PUI patients. When N95 are reused, the HCP must:
  - Follow the manufacturer's user instructions, including conducting a user seal check prior to every use.
  - Redonning up to five times in a single shift, then must discard in trash.
  - Inspect N95 for damage and integrity, do not use if impaired.
  - Store used N95 in a breathable bag or container to be used by a single wearer.

**From:** [mvergara@premierecollege.edu](mailto:mvergara@premierecollege.edu)  
**To:** [olayugan@premierecollege.edu](mailto:olayugan@premierecollege.edu)  
**Subject:** FW: Clinical Resumption  
**Date:** Wednesday, May 13, 2020 11:54:29 AM  
**Attachments:** [Request for Live Scan Service - Highlighted - OUTSIDE AGENCY.pdf](#)

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Hello Ms. Ofelia,

This is another email from Dr. Ruby back in March. As you can see on the bottom, we were on the list of "schools that have not submitted information sheets and health clearance documents or live scan..." because we had halted all our cohorts from going back to clinicals at the time.

Thank you.

---

**From:** Ruby Griggs-Gabbedon [mailto:rgriggs@dhs.lacounty.gov]  
**Sent:** Tuesday, April 14, 2020 3:23 PM  
**To:** Gaines, Lurelean B <GAINESLB@ELAC.EDU>; Marilyn Getz <mgetz@glendale.edu>; Kelli James <kjames@msmu.edu>; Anthony Stein <astein@westcoastuniversity.edu>; Shirley Thomas <sthomas@compton.edu>; Albert McNames <aMcNames@americancareercollege.edu>; Baskaran, Christiana <BASKARC@LACITYCOLLEGE.EDU>; Hinoki, Kathleen <khinoki@exchange.calstatela.edu>; Suzanne Zemer <szemer@hlpusd.k12.ca.us>; Erica Martinez <emartinez@plattcollege.edu>; Delia Santana1 <deliasantana1@cdrewu.edu>; Diane Breckenridge <dianebreckenridge@cdrewu.edu>; Mickie Schuerger <mickieschuerger@cdrewu.edu>; mvergara@premierecollege.edu; Grace Ibanez <Gracel@success.edu>; Shirley Powell <ShirleyP@success.edu>; Anthony Stein <astein@westcoastuniversity.edu>; Morris, Wanda <wmorris@elcamino.edu>  
**Cc:** Sarah Granger <sgranger@dhs.lacounty.gov>; Edeline Lim <ELim2@dhs.lacounty.gov>; Gigi Ta <GTa@dhs.lacounty.gov>; Kimberly Bradley <Kbradley@dhs.lacounty.gov>  
**Subject:** Clinical Resumption

Dear Clinical Affiliates,

Subsequent to the COVID 19 Pandemic, many schools were forced to halt their clinical rotations. As we are beginning to see some light at the end of the tunnel, with the BRN's mandates, and the Governors acknowledgment of students being recognized as essential workers, many of you are seeking out opportunities to complete your clinical rotations at LAC+USC Medical Center. LAC+USC Medical Center employees are Disaster Workers (DW) and have continued to work throughout the pandemic. Although the medical center has never halted any clinical rotations, the impact of COVID 19 has suspended the on boarding of new students. This means that:

- Schools that have their students on boarded for the Spring/Summer rotations, will be able to resume their rotations after following up with me for ORCHID training
- Schools that have students that have partially on boarded can attempt to get their students live scanned utilizing the attached forms, and then follow up with me for ORCHID training
- Schools that have students that have not submitted their information sheets, nor their health clearance documents or their live scan forms will not be able to come back to the medical center until the COVID 19 pandemic has subsided.
- For those schools that are assigned to the Pediatric Ward, there are no more than five (5)

students allowed per rotation, all clinics are closed as well

Please note that we will not make any new assignments in CCPS. Please feel free to follow up with me should you have any questions.

Warm Regards,

Ruby Gabbedon DNP, CNML, RN  
Coordinator, Affiliate Schools  
(323)409-2752



# REQUEST FOR LIVE SCAN SERVICE

## Applicant Submission

A1636

ORI (Code assigned by DOJ)

Authorized Applicant Type

Type of License/Certification/Permit OR Working Title (Maximum 30 characters - if assigned by DOJ, use exact title assigned)

### Contributing Agency Information:

DEPARTMENT OF HEALTH SERVICES

Agency Authorized to Receive Criminal Record Information

5555 FERGUSON DRIVE

Street Address or P.O. Box

COMMERCE

City

CA

State

90022

ZIP Code

06096

Mail Code (five-digit code assigned by DOJ)

GLORIA ALVAREZ

Contact Name (mandatory for all school submissions)

(323) 869-8242

Contact Telephone Number

## Applicant Information:

Last Name

Other Name

(AKA or Alias) Last

Date of Birth

Sex

Male

Female

Height

Weight

Eye Color

Hair Color

Place of Birth (State or Country)

Social Security Number

Home

Address Street Address or P.O. Box

First Name

Middle Initial

Suffix

First

Suffix

Driver's License Number

Billing Number

(Agency Billing Number)

Misc.

Number

(Other Identification Number)

City

State

ZIP Code

Your Number:

OCA Number (Agency Identifying Number)

Level of Service:

DOJ

FBI

If re-submission, list original ATI number:

(Must provide proof of rejection)

Original ATI Number

## Employer (Additional response for agencies specified by statute):

Employer Name

Street Address or P.O. Box

City

State

ZIP Code

Mail Code (five digit code assigned by DOJ)

Telephone Number (optional)

## Live Scan Transaction Completed By:

Name of Operator

Date

Transmitting Agency

LSID

ATI Number

Amount Collected/Billed

**From:** [Miranda, Juliet](mailto:Juliet.Miranda@altahospitals.com)  
**To:** [olayugan@premierecollege.edu](mailto:olayugan@premierecollege.edu)  
**Cc:** "[Magan Vergara](mailto:Magan.Vergara@premierecollege.edu)"; "[Rowena Gabriel](mailto:Rowena.Gabriel@premierecollege.edu)"  
**Subject:** RE: Clinical Site Availability for Resumption of Clinical Rotation  
**Date:** Monday, June 8, 2020 11:44:04 AM  
**Attachments:** [image003.gif](#)  
[image004.png](#)

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You should be getting a call or letter from Claudia Reale, Director of Education as to when schools can return.

thanks

**Juliet Miranda, RN, MN**

Associate Chief Nursing Officer

**Norwalk Community Hospital, a facility of Alta Hospitals**

13222 Bloomfield Avenue

Norwalk, CA 90650

Cell # (310)486-8200

Office # (562)863-4763 ext. 213

e-mail: [juliet.miranda@altacorp.com](mailto:juliet.miranda@altacorp.com)

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**From:** [olayugan@premierecollege.edu](mailto:olayugan@premierecollege.edu) <[olayugan@premierecollege.edu](mailto:olayugan@premierecollege.edu)>

**Sent:** Friday, June 5, 2020 3:26 PM

**To:** Miranda, Juliet <[Juliet.Miranda@altahospitals.com](mailto:Juliet.Miranda@altahospitals.com)>

**Cc:** 'Magan Vergara' <[mvergara@premierecollege.edu](mailto:mvergara@premierecollege.edu)>; 'Rowena Gabriel' <[rgabriel@premierecollege.edu](mailto:rgabriel@premierecollege.edu)>

**Subject:** Clinical Site Availability for Resumption of Clinical Rotation

Hi Ms. Miranda,

Good afternoon. I hope this finds you well.

I am sending this email from Premiere Career College to check on the availability of your hospital for resumption of clinical rotation for our students. If and when the resumption of clinical rotations take effect, are there any requirements to be instituted by your organization that the school will have to implement with the students? Looking forward to any update from you.

Thank you and best regards.

*Ofelia F. Layugan, MSN-ED, RN*

*Program Director of Vocational Nursing*

*Premiere Career College*

12901 Ramona Boulevard

Irwindale, California 91706

[www.premierecollege.edu](http://www.premierecollege.edu)

*Tel. # 626.814.2080 ext. 2122*



**From:** [David Koz](mailto:David.Koz@premierecollege.edu)  
**To:** [mvergara@premierecollege.edu](mailto:mvergara@premierecollege.edu)  
**Cc:** [Jezy Jane Arizala](mailto:Jezy.Jane.Arizala@premierecollege.edu); [olayugan@premierecollege.edu](mailto:olayugan@premierecollege.edu)  
**Subject:** Re: Clinical Rotation - LADMC & Norwalk Community Hospital  
**Date:** Wednesday, May 20, 2020 3:35:03 PM

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Hello Magan,

I hope you're also well. Unfortunately the sites are not allowing students yet. We will make sure to keep you updated if anything changes.

Stay safe!

Thank you,  
David

On Wed, May 20, 2020 at 3:22 PM <[mvergara@premierecollege.edu](mailto:mvergara@premierecollege.edu)> wrote:

Hello Mr. David and Ms. Jezy,

I hope you are both doing well and staying safe!

It has been quite a while since we last contacted! However, we wanted to know by chance if you have heard from LADMC and Norwalk Community Hospital accepting students for clinical rotation any time soon?

We greatly appreciate your response.

Thank you!

*Best Regards,*

*Magan Vergara*

*Vocational Nursing Department*

*Premiere Career College*

[12901 Ramona Boulevard](http://12901.Ramona.Boulevard)

[Irwindale, California 91706](http://Irwindale.California.91706)

[www.premierecollege.edu](http://www.premierecollege.edu)

Phone: (626) 814-2080 ext. 2125

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Have a great day.

Thank you,

David Koz  
Regional Account Manager  
Pronto Wellness  
323-712-6669  
1130 E Green St. Suite 203  
Pasadena, CA 91106  
[www.Prontowellness.com](http://www.Prontowellness.com)





**From:** [Tina Darling](mailto:Tina.Darling@totallykids.com)  
**To:** [olayugan@premierecollege.edu](mailto:olayugan@premierecollege.edu)  
**Cc:** [Rowena Gabriel](mailto:Rowena.Gabriel@premierecollege.edu); [Magan Vergara](mailto:Magan.Vergara@premierecollege.edu)  
**Subject:** RE: Clinical Site Availability for Resumption of Clinical Rotation  
**Date:** Friday, June 5, 2020 11:25:01 PM  
**Attachments:** [image003.gif](#)  
[image004.png](#)  
[image005.png](#)

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Good evening Ofelia,

Sorry for the delay in response. Currently we continue to suspend clinical rotations. However, we will need proof that your students have a COVID 19 nasal swab prior to coming to our facility. We are following the CDC and CDPH guidelines for all.

Have a great night!

Tina B. Darling, MSN-Ed, BSN, RN, DSD  
Director of Staff Education  
Totally Kids Rehabilitation Hospital  
1720 Mountain View Avenue  
Loma Linda, California 92354  
(909) 796-6915 Ext.145  
[tina@totallykids.com](mailto:tina@totallykids.com)



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**From:** [olayugan@premierecollege.edu](mailto:olayugan@premierecollege.edu) <[olayugan@premierecollege.edu](mailto:olayugan@premierecollege.edu)>  
**Sent:** Friday, June 5, 2020 3:30 PM  
**To:** [tina@totallykids.com](mailto:tina@totallykids.com)  
**Cc:** 'Rowena Gabriel' <[rgabriel@premierecollege.edu](mailto:rgabriel@premierecollege.edu)>; 'Magan Vergara' <[mvergara@premierecollege.edu](mailto:mvergara@premierecollege.edu)>  
**Subject:** Clinical Site Availability for Resumption of Clinical Rotation

Hi Ms. Darling,

Good afternoon. I hope this finds you well.

I am sending this email from Premiere Career College to check on the availability of your institution for resumption of clinical rotation for our students. If and when the resumption of clinical rotations take effect, are there any requirements to be instituted by your organization that the school will have to implement with the students? Looking forward to any update from you.

Thank you and best regards.

*Ofelia F. Layugan, MSN-ED, RN*  
*Program Director of Vocational Nursing*  
*Premiere Career College*

12901 Ramona Boulevard  
Irwindale, California 91706  
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*Tel. # 626.814.2080 ext. 2122*



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**From:** [olayugan@premierecollege.edu](mailto:olayugan@premierecollege.edu)  
**To:** [Fairchild, Cindy@DCA](mailto:Fairchild_Cindy@DCA)  
**Cc:** "Alice Campbell"; [doctorfe@premierecollege.edu](mailto:doctorfe@premierecollege.edu); [NCedeno.ISE@gmail.com](mailto:NCedeno.ISE@gmail.com)  
**Subject:** RE: request to admit a class and 2nd quarter pass rates  
**Date:** Tuesday, July 28, 2020 4:56:30 PM  
**Attachments:** [image001.png](#)  
[Assessment for NCLEX Readiness Agreement 7 21 20207269.pdf](#)  
[ATI Proctored Exam -Remediation PLAN.pdf](#)  
[ATI Practice A B Exam -Remediation PLAN.pdf](#)  
[PREMIERE -NCLEX IMPROVMENT PLAN -7-27-2020.pdf](#)

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[EXTERNAL]: [olayugan@premierecollege.edu](mailto:olayugan@premierecollege.edu)

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**NEVER:** provide credentials on websites via a clicked link in an Email.

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Dear Dr. Fairchild,

Good afternoon! I hope you're having a great day.

Before anything else, I would like to thank you for allowing me some additional time to gather the information needed in support of our request to start a new class. I appreciate it a lot. So here are our responses pertaining to the questions:

1. Are any of your current students in clinical sites? If so submit the clinical sites, schedule, and contact person.
  - None of our students are currently in any of our affiliate clinical sites. Most of our clinical affiliates have denied the acceptance of students in their patient care units. We have been in constant communication with most of our clinical sites to see if clinical rotation is possible. For most of the affiliate clinical sites, we were told that clinicals will be on hold until further notice.
  - Norwalk Community Hospital is the only hospital in our list of affiliates that have expressed willingness to allow students in the clinical sites; however, the testing and clearance requirement for COVID-19 and other factors and restrictions imposed on the clinical experience of the students due to COVID-19 do not support the clinical goals and objectives for the term assigned to have their clinical rotation in the aforementioned clinical site.
  - With regard to LAC-USC, although the medical center has never halted any clinical rotations, the impact of COVID 19 has suspended the on-boarding of new students. Our school was affected by this due to the fact that the students were not able to complete the paperwork and other requirements for on-boarding when the clinical affiliate site announced that those who have not completed the on-boarding process will not be able to come back to the medical center until the COVID 19 pandemic has

subsidied.

2. On May 5, 2020 a plan was submitted to improve NCLEX-PN® rates. Submit an update and analysis of this plan.
  - Please see attachment for NCLEX-PN update and plan analysis and accompanying exhibits.
3. Submit an update on the May and June graduating classes. How many students complete the program from each cohort? How many students passed the exit exam and are considered graduates?
  - Cohort VN 51 – 24 students completed the program on May 28, 2020. Out of this number, 19 passed the exit exams on the first take and are thus considered graduates; 5 students failed the first take and had to retake the exit exams. These 5 students are now considered completers.
  - Due to a delay in the start of VN 52's clinical rotation due to the COVID-19 situation, the cohort VN 52 graduation has been delayed. This group will be completing their exit exams (ATI Comprehensive Examinations Proctored A) on August 10 which will determine who will be considered a graduate or a completer

Thank you and best regards.

Ofelia F. Layugan, MSN-ED, RN  
Program Director of Vocational Nursing  
Premiere Career College  
12901 Ramona Boulevard  
Irwindale, California 91706  
[www.premierecollege.edu](http://www.premierecollege.edu)  
**Tel.# 626.814.2080 ext. 2122**  
Email: [olayugan@premierecollege.edu](mailto:olayugan@premierecollege.edu)



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**From:** Fairchild, Cindy@DCA <Cindy.Fairchild@dca.ca.gov>  
**Sent:** Sunday, July 19, 2020 12:25 PM  
**To:** [olayugan@premierecollege.edu](mailto:olayugan@premierecollege.edu)

**Subject:** request to admit a class and 2nd quarter pass rates

Hi Ofelia,

I am reviewing the documents you submitted in preparation to complete the report for the Board meeting August 21, 2020.

Are any of your current students in clinical sites? If so submit the clinical sites, schedule, and contact person.

On May 5, 2020 a plan was submitted to improve NCLEX-PN® rates. Submit an update and analysis of this plan.

Submit an update on the May and June graduating classes. How many students complete the program from each cohort? How many students passed the exit exam and are considered graduates?

At this time I will be recommending to deny the class start as the NCLEX-PN® pass rates are at 62% for the yearly average and 33% for the second quarter of 2020.

Submit the responses to the above by Wednesday July 22, 2020 at 1500  
Please let me know if you have any questions

Cindy Fairchild EdD, MSN, RN  
Nursing Education Consultant  
Board of Vocational Nursing & Psychiatric Technicians  
2535 Capitol Oaks Drive, Suite 205  
Sacramento, CA 95833  
P: 916-532-6146

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# PREMIERE CAREER COLLEGE

## VOCATIONAL NURSING PROGRAM

### Assessment for NCLEX-PN Readiness Agreement

Premiere Career College (PCC) is committed to assist you in achieving a passing score on the National Council Licensure Examination for Vocational Nursing (NCLEX-PN). PCC and NOT the Board of Vocational Nursing and Psychiatric Technicians (BVNPT) or any other accrediting and licensing agency requires that you comply with the following process prior to PCC submitting your application to BVNPT.

Research has demonstrated a strong correlation between successful completion of ATI proctored assessments and successful first-time pass rates on the NCLEX-PN. Therefore, PCC has implemented the ATI Comprehensive Assessment and Remediation Program (CARP) in the nursing curriculum. As part of the ATI package, you will be required to complete proctored assessments at the conclusion of each course.

You can achieve a maximum of 10 points by:

1. Preparing for the exam
2. Achieving proficiency Level 2 or 3
3. Completing the approved remediation for the topics you missed.

See rubric below for the combination of the total point awards.

<b>Standardized Proctored Assessment</b>			
<b>Level 3 = 4 points</b>	<b>Level 2 = 3 points</b>	<b>Level 1 = 1 point</b>	<b>Below Level 1 = 0</b>
Remediation = 2 %: <ul style="list-style-type: none"> <li>• Minimum one-hour Focused Review</li> <li>• For each topic missed, complete an active learning template and identify three critical points to remember. **</li> </ul>	Remediation = 2 %: <ul style="list-style-type: none"> <li>• Minimum two-hour Focused Review</li> <li>• For each topic missed, complete an active learning template and identify three critical points to remember. **</li> </ul>	Remediation = 2 %: <ul style="list-style-type: none"> <li>• Minimum three-hour Focused Review</li> <li>• For each topic missed, complete an active learning template and identify three critical points to remember. **</li> </ul>	Remediation = 2 %: <ul style="list-style-type: none"> <li>• Minimum four-hour Focused Review</li> <li>• For each topic missed, complete an active learning template and identify three critical points to remember. **</li> </ul>
<b>10/10 points</b>	<b>9/10 points</b>	<b>7/10 points</b>	<b>6/10 points</b>
<b>Proctored Assessment Retake*</b>			
<b>No Retake Required</b>	<b>No Retake Required</b>	<b>Retake Required</b>	<b>Retake Required</b>

Approved preparation for the proctored assessment must be completed before the proctored assessment. The final remediation must be completed within 7 days of the test date to award the total points. Assignments must be completed as prescribed or 0 points will be awarded. The total points achieved from the approved preparation, proctored assessment, and approved remediation will count for 10% of your course grade.



# PREMIERE CAREER COLLEGE

## VOCATIONAL NURSING PROGRAM

Note: If you receive a Level 1 or below Level 1 proficiency on the first proctored assessment you will be required to take the second proctored assessment within 15 days of the test date to receive your approved remediation points. You must receive a Level 2 or higher on that proctored assessment to be eligible to take the ATI Comprehensive Exam.

Note:

- All practice examinations must be completed “as scheduled” prior to taking any proctored examinations.
- Students are expected to attend a MANDATORY one-week NCLEX content review course (Offered by PCC) after program completion.
- If a score of 91% or higher is not achieved on the Comprehensive Predictor Examination within 60 days of completing the VN curriculum, the student will be required to re-take the NCLEX-PN review course.
- Students are expected to schedule a date to take the NCLEX-PN Exam within 90 days of completing the VN program. Failure to do so will result in the student being required to retake an NCLEX-PN review course.
- Failure to complete the NCLEX-PN Assessment Readiness requirements will result in a delay in the submission of your application to the BVNPT.

Your signature on this form indicates your understanding of the above Readiness Agreement requirements for completion of the Vocational Nursing Program.

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(Print Name) Student

---

Signature / Date



---

(Print Name) Program Director

---

Signature/Date





# PREMIERE CAREER COLLEGE

## VOCATIONAL NURSING PROGRAM

### ATI Proctored Exam - Remediation PLAN

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Cohort: \_\_\_\_\_ Term: \_\_\_\_\_ Instructor: \_\_\_\_\_

ATI Exam: \_\_\_\_\_ Score: \_\_\_\_\_

Instructor / Student Plan for Remediation:

- Complete an ATI focused review for missed topics
  - Complete Nurse Logic Modules
  - Complete assessments in Learning System PN
  - Attain an 85% on the online practice test Form A
  - Complete application exercises form the ATI Review Modules based on topics missed
  - Complete Remediation Template found on the Student ATI Home Page
  - Create a concept map on the missed topics
  - Complete a 5x7 note card for each topic to review
  - Visit skills lab to practice related skills
  - Other \_\_\_\_\_
- Total Hours Assigned: \_\_\_\_\_  
Total Hours Assigned: \_\_\_\_\_  
Total Hours Assigned: \_\_\_\_\_

I agree to complete the plan for remediation by: \_\_\_\_\_ (within 15 days)

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Instructor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Status of Remediation:

Complete  Incomplete

Remediation Exam Grade: \_\_\_\_\_ / \_\_\_\_\_ %

Final Grade Received: \_\_\_\_\_ / \_\_\_\_\_ %

Comments:

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Instructor Signature: \_\_\_\_\_ Date: \_\_\_\_\_





# PREMIERE CAREER COLLEGE

## VOCATIONAL NURSING PROGRAM

### ATI Practice A & B Exam -Remediation PLAN

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Cohort: \_\_\_\_\_ Term: \_\_\_\_\_ Instructor: \_\_\_\_\_

ATI Exam: \_\_\_\_\_ Score: \_\_\_\_\_

Instructor / Student Plan for Remediation:

- Complete ATI Focus Review and Required hours for missed topics based on the \_\_\_% achieve.
- Attain 90% or above the online practice test A & B.
- Complete Active Learning Templates (ALT) based on the % achieve.
- Meet with your instructor for tutoring.
- Other: \_\_\_\_\_

I agree to complete the plan for remediation by: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Instructor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Status of Remediation:

- Complete
- Incomplete
  - Incomplete focus review hours and templates will result on not being able to sit on the day of the Proctored Exam until requirements are met by the student.

Remediation Review Hour/s Criteria:

- ❖ 90% - or above    Need to complete 1 hour of focused review on topic missed.
- ❖ 80% - 89%        Need to complete 2 hours of focused review for each topic missed and complete 3 ALT.
- ❖ 70% - 79%        Need to complete 3 hours of focused review for each topic missed and complete 6 ALT.
- ❖ 69% - and below    Need to complete 4 hours of focused review for each topic missed and complete 9 ALT.

**Premiere Career College (PCC)  
Vocational Nursing Program  
NCLEX IMPROVEMENT PLAN-Updated 7/23/2020**

Action Item #1	Indicators/Findings	Specific Actions/Activities	Effect (Actual/Expected) of Employed Interventions
<b>ATI POLICY</b>	<ul style="list-style-type: none"> <li>• ATI Policy</li> <li>• VN Student Handbook</li> </ul> <p>ATI policy requires updating; high-stakes final grade percentage &amp; remediation</p>	<p>(1) PD &amp; NCLEX/ATI Coordinator to revisit ATI policy for updating rubric and remediation requirements.</p> <p>(2) Remediation contract revised to include specific performance requirements. NCLEX readiness contract to be strengthened to ensure student success.</p>	<p>(1) NCLEX/ATI policy revised</p> <p style="padding-left: 20px;">a. with the allocation of ATI 10% of theory grade applicable to all courses with the content mastery specialty proctored exams</p> <p>(2) Instituted a Remediation plan supported by resources, time specific or target dates and with accountability assigned and documented.</p> <p>(See attached Policy and Remediation Forms)</p>
Action Item #2	Indicators / Findings	Specific Actions /Activities	Effect (Actual/Expected of Employed Interventions
<b>CURRICULUM</b>	<ul style="list-style-type: none"> <li>• IP &amp; Syllabus need to be updated</li> <li>• Course hours for theory and clinical unbalanced.</li> </ul> <p>Current curriculum needs to be reevaluated overall for each course content, objectives, sequencing of courses within the terms and the allocation of total hours for each course.</p>	<p>(1) Utilize Faculty, Consultants, including NEC, as needed to assist with curriculum evaluation and revision and updates.</p> <p>(2) Map ATI products across all 4 Terms</p> <p>(3) Perform a cross analysis of the curriculum with the detailed NCLEX test plan</p> <p>(4) Seek additional clinical sites</p> <p>(5) Update of syllabi and clinical evaluation tools</p> <p>(6) Update teaching methods with active learning strategies including: simulation, Case studies /scenarios, and various media types to support curriculum</p>	<p>(1) Provide guidance on curricular changes utilizing outcome data and feedback from stakeholders</p> <p>(2) (3) To ensure essential elements are covered adequately</p> <p>(4) New clinical sites will provide for a varied clinical experience and to meet objectives</p> <p>(5) Syllabi will provide specific course expectations to be met and evaluation tools will measure knowledge and clinical skills progression and mastery across the curriculum</p> <p>(6) Enhance instructional delivery and align with current best practices including development of critical thinking and clinical judgement.</p>

**Premiere Career College (PCC)  
Vocational Nursing Program  
NCLEX IMPROVEMENT PLAN-Updated 7/23/2020**

		(7) Consider requiring Capstone course at end of program	7) A required end-of-program comprehensive course that will assess cognitive, affective and psychomotor learning which requires the command, analysis and synthesis of knowledge & skills.
<b>Action Item #3</b>	<b>Indicators / Findings</b>	<b>a. Specific Actions /Activities</b>	<b>Effect (Actual/Expected of Employed Interventions</b>
<b>TESTING &amp; EVALUATION</b>	Reflecting of NCLEX test plan, test blue printing, test item analysis, and plan for test construction and revision.	<p>(1) Utilize NCLEX Test Plan, Test Item Blue Print, Provide training on ATI exam builder for test construction and test item writing.</p> <p>(2) Utilizing ATI total testing and remediation package across all terms</p> <p>(3) Structured remediation</p> <p>(4) Competency testing at various points in program i.e. Content Mastery Series - Proctored.</p> <p>(5) Evaluate PN passing rate data from NCSBN (Mountain Measurement) per cohort</p> <p>(6) Analysis trends on ATI Assessments (Proctored &amp; Comprehensive exams) per cohorts. Consult with ATI to modify ATI review program based on trends.</p> <p>(7) Utilize seasoned faculty (Mr. Laurino) to assist with test item construction and using NCSBN 2020 Blue Print</p>	<p>(1) NCLEX test plan service as blue print to outline on content to be tested and serve as a guide for both exam development and candidate preparation</p> <p>(2) Will ensure to provide a systematic plan</p> <p>(3) Provides plan to accomplish objectives to reach desired outcomes.</p> <p>(4) To identify gaps in course content and modify curriculum based on outcomes</p> <p>(5) Faculty to use ATI test banks for developing quizzes, unit tests, and final exams</p> <p>(6) Initiated a training plan focused on test item writing and test construction.</p> <p>(7) Scheduled monthly faculty training with Mr. Laurino</p>

**Premiere Career College (PCC)  
Vocational Nursing Program  
NCLEX IMPROVEMENT PLAN-Updated 7/23/2020**

Action Item#4	Indicators/Findings	Specific Actions /Activities	Effect (Actual/Expected) of Employed Interventions
<p style="text-align: center;"><b>EVALUATION OF STUDENT ACHIEVEMENT</b></p>	<ul style="list-style-type: none"> <li>• Lesson Plans / Syllabi</li> <li>• Remediation Policy</li> <li>• ATI Policy</li> <li>• Grading Policy</li> </ul> <p>Faculty to evaluate testing and evaluation methods (grading scale)</p>	<ol style="list-style-type: none"> <li>(1) Review course grades</li> <li>(2) Increase passing standard</li> <li>(3) Progression in testing through program</li> <li>(4) Remediation contract revised to include specific performance requirements. NCLEX readiness contract to be strengthened to ensure student success.</li> <li>(5) Redefine remediation procedure to specify the student's area of weakness with specific measurable goals that must be attained or performed to demonstrate success.</li> </ol>	<p>(1), (2), (3), (4) - Grading policy</p> <ul style="list-style-type: none"> <li>• was revised with Cohorts: VN 52, VN 53, and VN 54 commencing in term that started in March 2020</li> <li>• Revised Remediation plan implemented. Instructors and student accountable to meet plan by identified completion date.</li> </ul> <p>(5) Remediation procedure redefined to facilitate goal of meeting objectives.</p> <p>See attached revised Remediation Plan form</p>
Action Item #5	Findings/Indicators	Specific Actions /Activities	Effect (Actual/Expected) of Employed Interventions
<p style="text-align: center;"><b>FACULTY DEVELOPMENT</b></p>	<ul style="list-style-type: none"> <li>• Faculty Development plan</li> <li>• ATI curriculum mapping</li> <li>• VN Program Lesson Plans</li> </ul> <p>Ineffective use of ATI resource products</p> <p>No evidence of standardized testing (formative &amp; summative</p>	<ol style="list-style-type: none"> <li>(1) Provide opportunities for Faculty Development to ensure delivery of instructional success.</li> <li>(2) Improve new faculty onboarding orientation process to include but not limited to:               <ol style="list-style-type: none"> <li>(a) Theory &amp; Clinical Expectations</li> <li>(b) Responsibilities</li> <li>(c) Resources</li> <li>(d) Tools</li> <li>(e) Micro Teaching</li> </ol> </li> </ol>	<ol style="list-style-type: none"> <li>(1) Faculty are engaged with ATI Academy, and Max-Knowledge courses to enhance teaching effectiveness and to maximize on the available tips and resources to implement accordingly.</li> <li>(2) Assist new instructors to acclimate to their role and be informed as to the tools to enhance effectiveness in role.</li> </ol>

**Premiere Career College (PCC)  
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<b>Faculty Dev (cont.)</b>	evaluation) strategy utilized by instructors (ATI assessments)	<p>(f) Peer-to-peer Shadowing (g) Classroom management &amp; learner engagement</p> <p>(3) PD will continue to evaluate and monitor faculty performance</p> <p>(4) PD will conduct regular evaluations to include Theory &amp; clinical observations.</p> <p>(5) Explore different lesson formats and activities that will increase cognitive engagement, knowledge retention, collaboration and use of critical thinking and clinical reasoning</p>	<p>(3) Provides opportunity to update individualized development plan with tools, resources training opportunities.</p> <p>(4) To provide an intervention plan to assist faculty to be able to function effectively in the role.</p> <p>(5) Implement active learning strategies to encourage student engagement.</p>
<b>Action Item #6</b>	<b>Findings/Indictors</b>	<b>Specific Actions /Activities</b>	<b>Effect (Actual/Expected) of Employed Interventions</b>
<b>NCLEX PN TEST READINESS</b>	<ul style="list-style-type: none"> <li>• VN Student Handbook</li> <li>• ATI Policy /NCLEX- PN Student Readiness Plan</li> </ul>	<p>(1) Assess students for at-risk status upon admission or early in the program</p> <p>(2) Conduct opportunities for taking exams in a campus computer lab to simulate NCLEX testing conditions.</p> <p>(3) Contract content experts to facilitate review</p> <p>(4) Continue offering ATI testing and assessments to determine student success utilizing the Content Mastery Series (7 proctored exams)</p> <p>(5) Reinforce ATI remediation plan to achieve benchmarks of level 2 or better on the proctored exams.</p>	<p>(1) - (10) Establishing an individualized early intervention plan, will result in success in the program and on the NCLEX.</p> <p>(2) Opportunities for practicing taking exams in a simulated testing environment will help build confidence.</p> <p>(3), (7), (8) Implement a solid NCLEX -PN review course for new grads and outliers.</p> <p>(4), (5), (6) (11) Students are supported with resources and tools to facilitate success</p>

**Premiere Career College (PCC)  
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<p><b>NCLEX PN TEST READINESS (cont)</b></p>		<p>(6) Continue to partner with virtual ATI Coach for continuity and follow-up of student progress.</p> <p>(7) Establish a consistent schedule for end of program boot camp</p> <p>(8) Continue to recall graduates unsuccessful in passing NCLEX on first attempt. Provide opportunities for participation in NCLEX review, tutorials and other remedial activities.</p> <p>(9) Establish tracking system for monitoring individual and group progress of testing activities from ATI</p> <p>(10)Evaluating and supporting at-risk students (embed tutoring throughout the program)</p> <p>(11) Faculty will take accountability for enforcing the ATI program.</p> <p>(12)Reinforce focus reviews and requirements for meeting acceptable benchmarks for all assessments</p> <p>(13)Other related strategies for NCLEX readiness: 1. Schedule NCLEX within 3 months of passing exit exam to avoid information decay</p> <p>(14)Continue to engage students while pending approval and test dates</p> <p>(15)Encourage students to take NCLEX exam as soon as possible after review completion and meeting ATI predictor benchmarks.</p> <p>(16)Establish an effective mechanism for monitoring testers and a tracking system that would allow timely follow-up</p>	<p>(6) Students at risk to be prioritized by NCLEX/ATI coordinator for close monitoring and tutoring</p> <p>(8), (9) NCLEX/ATI Coordinator and PD will collaborate in tracking through ATI dashboard and analytics &amp; information from graduates of their test outcome results.</p> <p>(11), (12) Pass the ATI Content mastery series and the Comprehensive Exam.</p> <p>(13), (14) Early testing completion of the NCLEX increase chances of success.</p> <p>(15), (16) Weekly one-on-one engagement with students by PD and instructor to track review progress.</p>
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**Premiere Career College (PCC)  
Vocational Nursing Program  
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<b>Action Item #7</b>	<b>Findings/Indictors</b>	<b>Specific Actions /Activities</b>	<b>Effect (Actual/Expected) of Employed Interventions</b>
<b>SYSTEMATIC PROGRAM EVALUATION PLAN</b>	<ul style="list-style-type: none"> <li>• Admission scores</li> <li>• GPA – High School or college</li> <li>• Other selected student characteristics</li> <li>• Repeats of course work</li> <li>• Scores NCLEX predictor</li> </ul>	<ol style="list-style-type: none"> <li>(1) Develop a systematic eval plan to tract the correlation of such factors as admission scores, High School or college GPA and nursing course GPA</li> <li>(2) Utilize ATI analytics and data from Mountain Measurement</li> <li>(3) ATI Coach VATI</li> </ol>	<p>Results will provide data points for:</p> <ul style="list-style-type: none"> <li>• Candidate selection</li> <li>• Course content enhancements</li> <li>• Strategy adjustments</li> <li>• Success Plans</li> <li>• Resource allocation</li> </ul>
<b>Action Item #8</b>	<b>Findings/Indictors</b>	<b>Specific Actions /Activities</b>	<b>Effect (Actual/Expected) of Employed Interventions</b>
<b>NON-ACADEMIC STRATEGIES</b>	<p>No early intervention plan / strategies to identify at-risk students.</p> <p>Extension of additional support was not available.</p>	<ol style="list-style-type: none"> <li>(1) Provide study and test taking skills Workshops early in the program to facilitate the development of such skills. i.e. Basic Math, Drug Calculations, Medical Terminology, Anatomy &amp; Physiology, Test taking strategies               <ol style="list-style-type: none"> <li>(a). Assess for student learning style and establish an individualized early intervention plan.</li> <li>(b) Reschedule faculty work schedule to accommodate faculty -student mentorship</li> <li>(c) Student Mentoring – must have an overall performance score of 85% or better to be a mentor</li> </ol> </li> <li>(2) Assess and evaluate student needs for support services i.e. anxiety management, test taking strategies, study skills, community resources</li> </ol>	<ol style="list-style-type: none"> <li>(1) To establish early intervention plan, with monitoring of support and promote success, including:               <ul style="list-style-type: none"> <li>• student-to -student support groups</li> <li>• to support at-risk students throughout the continuum</li> <li>• to enhance foundation of basic skills.</li> </ul> </li> <li>(2) Provide a network of support services to facilitate non-academic needs.</li> </ol>

**From:** [olayugan@premierecollege.edu](mailto:olayugan@premierecollege.edu)  
**To:** [Fairchild, Cindy@DCA](mailto:Fairchild_Cindy@DCA)  
**Cc:** "[Alice Campbell](mailto:Alice_Campbell)"; [NCedeno.ISE@gmail.com](mailto:NCedeno.ISE@gmail.com); [doctorfe@premierecollege.edu](mailto:doctorfe@premierecollege.edu)  
**Subject:** RE: request to admit a class and 2nd quarter pass rates  
**Date:** Thursday, July 30, 2020 2:19:12 PM  
**Attachments:** [image001.png](#)

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[EXTERNAL]: [olayugan@premierecollege.edu](mailto:olayugan@premierecollege.edu)

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Hi again, Dr Fairchild,

Good afternoon!

Here's more data pertaining to the following questions sent on 7/28/20

:

1. How many hours a week does each student attend clinical hours on campus.
  - The students currently do not come on campus for clinical hours.
2. Does theory continue to be conducted in an online format?
  - Yes, all of the theory hours continue to be conducted in an online format.
3. What date will VN52 meet 144 hours of simulated clinical experiences for term 4?
  - VN 52 met the 144 hours of simulated clinical experience in Term 4 on June 22, 2020.
4. What date will VN53 meet 144 hours of simulated clinical experiences for term 3?
  - VN 53 met the 144 hours of simulated clinical experience on June 21, 2020
5. What will be the plan if clinical sites are not obtained when the two cohort are at 50% simulation?
  - As previously stated in our request for a new class, we will continue to monitor for availability of our clinical sites for clinical rotation but in the event that the sites remain unavailable by the time the two cohorts complete 50 % of simulation, we will continue to frontload the theory portion of the term, and consider Telehealth as an option. Otherwise, per the general provision of the CARES ACT, "students who are in term-based institutions who are unable to continue with the completion of the program requirements due to COVID-19 related circumstances will have to be put on a leave of absence and resume training at the same point in the program when available."

Thank you and best regards.

Ofelia F. Layugan, MSN-ED, RN  
Program Director of Vocational Nursing  
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**From:** Fairchild, Cindy@DCA <[Cindy.Fairchild@dca.ca.gov](mailto:Cindy.Fairchild@dca.ca.gov)>

**Sent:** Tuesday, July 28, 2020 5:07 PM

**To:** [olayugan@premierecollege.edu](mailto:olayugan@premierecollege.edu)

**Subject:** RE: request to admit a class and 2nd quarter pass rates

Thank you Ofelia,

How many hours a week does each student attend clinical hours on campus.

Does theory continue to be conducted in an online format?

What date will VN52 meet 144 hours of simulated clinical experiences for term 4?

What date will VN53 meet 144 hours of simulated clinical experiences for term 3?

What will be the plan if clinical sites are not obtained when the two cohort are at 50% simulation?

Please respond with the answers as soon as possible.

Thank you

Cindy Fairchild EdD, MSN, RN

Nursing Education Consultant

Board of Vocational Nursing & Psychiatric Technicians

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**From:** [olayugan@premierecollege.edu](mailto:olayugan@premierecollege.edu) <[olayugan@premierecollege.edu](mailto:olayugan@premierecollege.edu)>

**Sent:** Tuesday, July 28, 2020 5:00 PM

**To:** Fairchild, Cindy@DCA <[Cindy.Fairchild@dca.ca.gov](mailto:Cindy.Fairchild@dca.ca.gov)>

**Cc:** 'Alice Campbell' <[alicedcampbell1@outlook.com](mailto:alicedcampbell1@outlook.com)>; [doctorfe@premierecollege.edu](mailto:doctorfe@premierecollege.edu);  
[NCedeno.ISE@gmail.com](mailto:NCedeno.ISE@gmail.com)

**Subject:** RE: request to admit a class and 2nd quarter pass rates

[EXTERNAL]: [olayugan@premierecollege.edu](mailto:olayugan@premierecollege.edu)

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Dear Dr. Fairchild,

Good afternoon! I hope you're having a great day.

Before anything else, I would like to thank you for allowing me some additional time to gather the information needed in support of our request to start a new class. I appreciate it a lot. So here are our responses pertaining to the questions:

1. Are any of your current students in clinical sites? If so submit the clinical sites, schedule, and contact person.
  - None of our students are currently in any of our affiliate clinical sites. Most of our clinical affiliates have denied the acceptance of students in their patient care units. We have been in constant communication with most of our clinical sites to see if clinical rotation is possible. For most of the affiliate clinical sites, we were told that clinicals will be on hold until further notice.
  - Norwalk Community Hospital is the only hospital in our list of affiliates that have expressed willingness to allow students in the clinical sites; however, the testing and clearance requirement for COVID-19 and other factors and restrictions imposed on the clinical experience of the students due to COVID-19 do not support the clinical goals and objectives for the term assigned to have their clinical rotation in the aforementioned clinical site.
  - With regard to LAC-USC, although the medical center has never halted any clinical rotations, the impact of COVID 19 has suspended the on-boarding of new students. Our school was affected by this due to the fact that the students were not able to complete the paperwork and other requirements for on-boarding when the clinical affiliate site announced that those who have not completed the on-boarding process will not be able to come back to the medical center until the COVID 19 pandemic has subsided.
2. On May 5, 2020 a plan was submitted to improve NCLEX-PN® rates. Submit an update and analysis of this plan.
  - Please see attachment for NCLEX-PN update and plan analysis and

accompanying exhibits.

3. Submit an update on the May and June graduating classes. How many students complete the program from each cohort? How many students passed the exit exam and are considered graduates?
  - Cohort VN 51 – 24 students completed the program on May 28, 2020. Out of this number, 19 passed the exit exams on the first take and are thus considered graduates; 5 students failed the first take and had to retake the exit exams. These 5 students are now considered completers.
  - Due to a delay in the start of VN 52's clinical rotation due to the COVID-19 situation, the cohort VN 52 graduation has been delayed. This group will be completing their exit exams (ATI Comprehensive Examinations Proctored A) on August 10 which will determine who will be considered a graduate or a completer

Thank you and best regards.

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**From:** Fairchild, Cindy@DCA <[Cindy.Fairchild@dca.ca.gov](mailto:Cindy.Fairchild@dca.ca.gov)>  
**Sent:** Sunday, July 19, 2020 12:25 PM  
**To:** [olayugan@premierecollege.edu](mailto:olayugan@premierecollege.edu)  
**Subject:** request to admit a class and 2nd quarter pass rates

Hi Ofelia,

I am reviewing the documents you submitted in preparation to complete the report for

the Board meeting August 21, 2020.

Are any of your current students in clinical sites? If so submit the clinical sites, schedule, and contact person.

On May 5, 2020 a plan was submitted to improve NCLEX-PN® rates. Submit an update and analysis of this plan.

Submit an update on the May and June graduating classes. How many students complete the program from each cohort? How many students passed the exit exam and are considered graduates?

At this time I will be recommending to deny the class start as the NCLEX-PN® pass rates are at 62% for the yearly average and 33% for the second quarter of 2020.

Submit the responses to the above by Wednesday July 22, 2020 at 1500  
Please let me know if you have any questions

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